

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000034813

FILED
Apr 24, 2012
Secretary of State

Entity Name: CENTRAL FLORIDA ACCIDENT AND INJURY LLC

Current Principal Place of Business:

3204 BUTLER BAY DRIVE NO
WINDERMERE, FL 34786

New Principal Place of Business:

6436 CARTMEL LANE
WINDERMERE, FL 34786

Current Mailing Address:

3204 BUTLER BAY DRIVE NO
WINDERMERE, FL 34786

New Mailing Address:

6436 CARTMEL LANE
WINDERMERE, FL 34786

FEI Number: 45-1350509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ENTWISTLE, THOMAS P
3204 BUTLER BAY DRIVE NO
WINDERMERE, FL 34786 US

Name and Address of New Registered Agent:

ENTWISTLE, THOMAS P
6436 CARTMEL LANE
WINDERMERE, FL 34786 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: THOMAS P ENTWISTLE

04/24/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: ENTWISTLE, THOMAS P
Address: 6436 CARTMEL LANE
City-St-Zip: WINDERMERE, FL 34786 US

Title: MGRM
Name: ENTWISTLE, MAUREEN
Address: 6436 CARTMEL LANE
City-St-Zip: WINDERMERE, FL 34786 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: THOMAS P ENTWISTLE

PRES

04/24/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date