2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 15, 2012
Secretary of State

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Entity Name: CENTRAL FLORIDA MOBILE LIVESCAN FINGERPRINTING & CONSULTING LLC

Current Principal Place of Business:

188 CRANE LANE
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

188 CRANE LANE
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 45-2930019 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FLORIDA FILING & SEARCH SERVICES, INC.
155 OFFICE PLAZA DRIVE, SUITE A
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SMITH, WILLIAM
Address: 188 CRANE LANE
City-St-Zip: HAINES CITY, FL 33844

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 Statues.

SIGNATURE: WILLIAM J. SMITH MR 04/15/2012

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