

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000072422

FILED
Jun 14, 2012
Secretary of State

Entity Name: SAFETYNET OF FLORIDA, LLC

Current Principal Place of Business:

4623 NW 53 AVE
SUITE 5
GAINESVILLE, FL 32653

New Principal Place of Business:

Current Mailing Address:

PO BOX 783
HIGH SPRINGS, FL 32655

New Mailing Address:

FEI Number: 45-2637534

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRADT, CHAD T
22191 NW 190 AVE
HIGH SPRINGS, FL 32643 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: BATEMAN, PAUL
Address: 10572 CR 13
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGRM
Name: BATEMAN, LORI
Address: 10572 CR 13
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGRM
Name: BRADT, CHRISTY
Address: 22191 NW 190 AVE
City-St-Zip: HIGH SPRINGS, FL 32655

Title: MGRM
Name: BRADT, CHAD
Address: 22191 NW 190 AVE
City-St-Zip: HIGH SPRINGS, FL 32655

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: CHAD T BRADT

MGRM

06/14/2012

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