

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000077250

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** SUNZ UP TANZ OF VENICE, LLC

**Current Principal Place of Business:**

1080 E. VENICE AVENUE  
VENICE, FL 34285 US

**New Principal Place of Business:**

1080 E. VENICE AVE  
VENICE, FL 34285 UN

**Current Mailing Address:**

1080 E. VENICE AVENUE  
VENICE, FL 34285 US

**New Mailing Address:**

1080 E. VENICE AVE  
VENICE, FL 34285 UN

**FEI Number:** 45-2674845

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COONS, TINA  
5244 DELIGHT AVE  
NORTH PORT, FL 34288 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:** OWNR  
**Name:** COONS, TINA  
**Address:** 5244 DELIGHT AVE  
**City-St-Zip:** NORTH PORT, FL 34288 UN

**Title:** MGR  
**Name:** MARK, SAGLIMBENI  
**Address:** 5244 DELIGHT AVE  
**City-St-Zip:** NORTH PORT, FL 34288 UN

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:** TINA COONS

OWNE

04/30/2012

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