

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000093123

**FILED**  
**Jan 25, 2012**  
**Secretary of State**

**Entity Name:** SINDICICH SALES AND CREATIVE ENTERPRISES, LLC

**Current Principal Place of Business:**

24 31ST AVE SOUTH  
JACKSONVILLE BEACH, FL 32250 US

**New Principal Place of Business:**

1124-3 N 3RD STREET  
JACKSONVILLE BEACH, FL 32250 US

**Current Mailing Address:**

2967 TWIN FALLS CT  
JACKSONVILLE, FL 32224 US

**New Mailing Address:**

**FEI Number:** 45-3026481      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

SINDICICH, NEIL H  
2967 TWIN FALLS CT  
JACKSONVILLE, FL 32224 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:** SINDICICH, NEIL H  
**Address:** 2967 TWIN FALLS CT  
**City-St-Zip:** JACKSONVILLE, FL 32224 US

**Title:** MGRM  
**Name:** SINDICICH, DIANA K  
**Address:** 2967 TWIN FALLS CT  
**City-St-Zip:** JACKSONVILLE, FL 32224 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: NEIL H SINDICICH

MGRM

01/25/2012

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