

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000101673

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** SALES TECHNIQUES, L.L.C.

**Current Principal Place of Business:**

15462 GULF BLVD  
STE 506  
MADEIRA BEACH, FL 33708

**New Principal Place of Business:**

**Current Mailing Address:**

15462 GULF BLVD  
STE 506  
MADEIRA BEACH, FL 33708

**New Mailing Address:**

**FEI Number:** 45-3208616

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EVERETT, JIM  
15462 GULF BLVD  
STE 506  
MADEIRA BEACH, FL 33708 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:** MGR  
**Name:** EVERETT, JIM  
**Address:** 15462 GULF BLVD 506  
**City-St-Zip:** MADEIRA BEACH, FL 33708

**Title:** MGRM  
**Name:** EVERETT, HELENA  
**Address:** 15462 GULF BLVD 506  
**City-St-Zip:** MADEIRA BEACH, FL 33708

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:** JAMES P EVERETT

PRE

01/06/2012

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