

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000114510

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** THE CONSUMERS' VOICE, LLC

**Current Principal Place of Business:**

18830 U.S. HIGHWAY 19 NORTH  
SUITE 330  
CLEARWATER, FL 33764 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5208  
CLEARWATER, FL 33758 US

**New Mailing Address:**

**FEI Number:** 45-3558344

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRY, J MARSHALL ATTY.  
905 E MLK DR.  
SUITE 228  
TARPON SPRINGS, FL 34689 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:** LOWMAN, RISA  
**Address:** 18830 U.S. HIGHWAY 19 NORTH, NO. 330  
**City-St-Zip:** CLEARWATER, FL 33764 US

**Title:** MGR  
**Name:** HERITAGE, DONNA  
**Address:** 18830 U.S. HIGHWAY 19 NORTH, NO. 330  
**City-St-Zip:** CLEARWATER, FL 33764

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: RISA LOWMAN

MGRM

04/10/2012

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