

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000120770

**Entity Name:** LYNN UNIQUE HOLDINGS, LLC

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

**Current Principal Place of Business:**

14924 N. FLORIDA AVE.  
TAMPA, FL 33613

**New Principal Place of Business:**

**Current Mailing Address:**

10802 TEEGREEN RD.  
TAMPA, FL 33612

**New Mailing Address:**

14924 N. FLORIDA AVE.  
TAMPA, FL 33613

**FEI Number:** 45-3651479

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LYNN, WINTON L  
10802 TEEGREEN RD  
TAMPA, FL 33612 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:** LYNN, WINTON L  
**Address:** 10802 TEEGREEN RD.  
**City-St-Zip:** TAMPA, FL 33612

**Title:** MGRM  
**Name:** LYNN, SUSAN J  
**Address:** 10802 TEEGREEN RD.  
**City-St-Zip:** TAMPA, FL 33612

**Title:** MGRM  
**Name:** SCHUMANN, JOHN R  
**Address:** 3605 PRUNES PL.  
**City-St-Zip:** TAMPA, FL 33618

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:** WINTON L. LYNN

MGRM

04/10/2012

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