

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000002236

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** MATTERS OF CONSEQUENCE, L.L.C.

**Current Principal Place of Business:**

12606 HENDERSON ROAD  
TAMPA, FL 33625

**New Principal Place of Business:**

**Current Mailing Address:**

4331 CARROLLWOOD VILLAGE DRIVE  
TAMPA, FL 33618

**New Mailing Address:**

**FEI Number:** 59-3590439

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KARNISKI, WALT  
4331 CARROLLWOOD VILLAGE DRIVE  
TAMPA, FL 33618 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:** KARNISKI, WALT  
**Address:** 4331 CARROLLWOOD VILLAGE DRIVE  
**City-St-Zip:** TAMPA, FL 33618

**Title:** MGR  
**Name:** OLDHAM, CHARLES  
**Address:** 901 SW ATWATER RD  
**City-St-Zip:** LAKE OSWEGO, OR 97034

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:** WALT KARNISKI

MGR

01/05/2012

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