

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069447

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Entity Name:** LINDSAY JOMAR MANAGEMENT CO., LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

6 MANGROVE POINT  
ST. PETERSBURG, FL 33706

**New Principal Place of Business:**

**Current Mailing Address:**

6 MANGROVE POINT  
ST. PETERSBURG, FL 33706

**New Mailing Address:**

**FEI Number:** 38-3709911

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LINDSAY, JOHN  
6 MANGROVE POINT  
ST. PETERSBURG, FL 33706 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: LINDSAY, JOHN  
Address: 6 MANGROVE POINT  
City-St-Zip: ST. PETERSBURG, FL 33706

Title: MGRM  
Name: LINDSAY, MARTHA A  
Address: 6 MANGROVE POINT  
City-St-Zip: ST. PETERSBURG, FL 33706

Title: MGRM  
Name: WILLIAMS, KATHRYN E  
Address: 8532 DEERPATH  
City-St-Zip: WEST CHESTER, OH 45069

Title: MGRM  
Name: KIDWELL, MARY L  
Address: 6311 ASH STREET  
City-St-Zip: PRARIE VILLAGE, KS 66208

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: BRAD A GALBRAITH

ATTY

03/21/2011

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