

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000111050

**FILED**  
**Mar 04, 2011**  
**Secretary of State**

**Entity Name:** CIRCLE K DEVELOPERS, LLC

**Current Principal Place of Business:**

2 SOUTH MAIN STREET  
CHIEFLAND, FL 32644

**New Principal Place of Business:**

328 NE 1 AVE  
CHIEFLAND, FL 32626

**Current Mailing Address:**

2 SOUTH MAIN STREET  
CHIEFLAND, FL 32644

**New Mailing Address:**

328 NE 1 AVE  
CHIEFLAND, FL 32626

**FEI Number:** 56-2547376

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BAYNARD, OWEN  
2 SOUTH MAIN STREET  
CHIEFLAND, FL 32644 US

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

BAYNARD, OWEN  
328 NE 1 AVE  
CHIEFLAND, FL 32626 US

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: \_\_\_\_\_

03/04/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BAYNARD, OWEN  
Address: POB 485  
City-St-Zip: CHIEFLAND, FL 32644

Title: MGRM  
Name: LESTOCK, JAMES J  
Address: 1644 SW SAINT JAMES CT.  
City-St-Zip: LAKE CITY, FL 32025

Title: MGRM  
Name: PENSCO TRUST COMPANY FBO JESSE LIPNICK  
Address: 450 SANSOME ST. - 14TH FLOOR  
City-St-Zip: SAN FRANCISCO, CA 94111

Title: MGRM  
Name: SCHWARTZ, PHILIP  
Address: POB 90243  
City-St-Zip: GAINESVILLE, FL 32607

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: OWEN BAYNARD

MGRM

03/04/2011

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