

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000057053

FILED  
Sep 27, 2012  
Secretary of State

Entity Name: SAMS NEW DEVELOPMENT, L.L.C.

**Current Principal Place of Business:**

712 E ALSOBROOK ST  
STE 7  
PLANT CITY, FL 33563

**New Principal Place of Business:**

2510 BAILEY RD  
MULBERRY, FL 33860

**Current Mailing Address:**

712 E ALSOBROOK ST  
STE 7  
PLANT CITY, FL 33563

**New Mailing Address:**

2510 BAILEY RD  
MULBERRY, FL 33860

FEI Number: 26-4259393

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LARRY SAMS  
2510 BAILEY ROAD  
MULBERRY, FL 33860 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: SAMS, LARRY D  
Address: 2510 BAILEY ROAD  
City-St-Zip: MULBERRY, FL 33860

Title: P  
Name: SAMS, LARRY  
Address: 2510 BAILEY ROAD  
City-St-Zip: MULBERRY, FL 33860

Title: P  
Name: SAMS, LARRY  
Address: 2510 BAILEY ROAD  
City-St-Zip: MULBERRY, FL 33860

Title: MGRM  
Name: SAMS, ANITA  
Address: 2510 BAILEY RD  
City-St-Zip: MULBERRY, FL 36386

Title: VP  
Name: SAMS, ANITA  
Address: 2510 BAILEY ROAD  
City-St-Zip: MULBERRY, FL 33860

Title: T  
Name: SAMS, ANITA  
Address: 2510 BAILEY ROAD  
City-St-Zip: MULBERRY, FL 33860

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: ANITA SAMS/LARRYSAMS

VP

09/27/2012

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