

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M96000000289

**FILED**  
**Mar 19, 2012**  
**Secretary of State**

**Entity Name:** BOYKIN MANAGEMENT COMPANY LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

8015 W KENTON CIRCLE  
SUITE 220  
HUNTERSVILLE, NC 28078

**New Principal Place of Business:**

**Current Mailing Address:**

8015 W KENTON CIRCLE  
SUITE 220  
HUNTERSVILLE, NC 28078

**New Mailing Address:**

**FEI Number:** 34-1836174

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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: MRG  
Name: ROBERT W BOYKIN  
Address: 8015 W KENTON CIRCLE, SUITE 220  
City-St-Zip: HUNTERSVILLE, NC 28078

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: ROBERT W. BOYKIN

MRG

03/19/2012

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