

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000075252

Entity Name: EQUI-GAIN, LLC

Current Principal Place of Business:

9315 CYPRESS COVE DRIVE
ORLANDO, FL 32819

Current Mailing Address:

P.O. BOX 22624
LAKE BUENA VISTA, FL 32830

FEI Number: 27-3084574

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOWMAN, JR., WILLIAM RESQ.
SHUFFIELD, LOWMAN & WILSON, P.A.
1000 LEGION PLACE, SUITE 1700
ORLANDO, FL 32801 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name EQUI-GAIN GROUP, LLC
Address P.O. BOX 22624
City-State-Zip: LAKE BUENA VISTA FL 32830

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EQUI-GAIN GROUP, LLC, BY DAVID L PEOPLES, MGR
MGR

04/27/2013

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date