

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000052091

**Entity Name:** QUEEN OF HEARTS, LLC

**Current Principal Place of Business:**

9530 SCENIC HWY  
PENSACOLA, FL 32514

**Current Mailing Address:**

9530 SCENIC HWY  
PENSACOLA, FL 32514

**FEI Number: 90-0839738**

**Certificate of Status Desired: No**

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

CLEVENGER, CAL L  
9530 SCENIC HWY  
PENSACOLA, FL 32514 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 MGRM  
Name CLEVENGER, CAL L  
Address 9530 SCENIC HWY  
City-State-Zip: PENSACOLA FL 32514

Title MGRM  
Name DURHAM, DOUGLAS M  
Address 2878 WHISPER LAKE DRIVE  
City-State-Zip: GULF BREEZE FL 32563

Title MGRM  
Name BURKS, BARNEY BIII  
Address 4588 SEA VISTA COURT  
City-State-Zip: GULF BREEZE FL 32563

Title MGRM  
Name STRANGE, GLEN B  
Address 2465 TRONJO CIRCLE  
City-State-Zip: PENSACOLA FL 32503

*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: DOUGLAS M DURHAM**

**MGRM**

**01/16/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date