

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000002873

**FILED**  
**Feb 12, 2011**  
**Secretary of State**

**Entity Name:** GAYLON BLACK, LLC

**Current Principal Place of Business:**

138 SPRING VALLEY LOOP  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

138 SPRING VALLEY LOOP  
ALTAMONTE SPRINGS, FL 32714 US

**Current Mailing Address:**

P.O. BOX 161547  
ALTAMONTE SPRINGS, FL 32716

**New Mailing Address:**

P.O. BOX 161547  
ALTAMONTE SPRINGS, FL 32716 US

**FEI Number:** 59-3639594

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLACK, GAYLON  
138 SPRING VALLEY LOOP  
ALTAMONTE SPRINGS, FL 32714 US

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

BLACK, GAYLON D  
138 SPRING VALLEY LOOP  
ALTAMONTE SPRINGS, FL 32714 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: GAYLON D BLACK

02/12/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM

Name: BLACK, GAYLON D

Address: 138 SPRING VALLEY LOOP

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US

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: GAYLON D BLACK

MGRM

02/12/2011

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