

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000006728

Entity Name: VALUEVEST, L.L.C.

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

237 BURT'S CROSSING DR  
DAWSONVILLE, GA 30534

**New Principal Place of Business:**

**Current Mailing Address:**

237 BURT'S CROSSING DR  
DAWSONVILLE, GA 30534

**New Mailing Address:**

FEI Number: 65-1014655

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PALMER, DANIEL K  
8445 YORKE RD  
WELLINGTON, FL 33414 US

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

PALMER, DANIEL K  
237 BURT'S CROSSING DR.  
DAWSONVILLE, FL 30534 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

04/11/2011

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: PALMER, DANIEL K  
Address: 237 BURT'S CROSSING DR  
City-St-Zip: DAWSONVILLE, GA 30534

Title: MGR  
Name: QUINLIVAN, WILLIAM R  
Address: 48 F CORNICHE DR.  
City-St-Zip: DANA POINT, CA 93629

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: DANIEL PALMER

MGR

04/11/2011

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