

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L02000003610

Entity Name: FERN MEADOWS, L.L.C.

**FILED**  
**Oct 10, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

6905 N. WICKHAM ROAD  
SUITE 501  
MELBOURNE, FL 32940

## **New Principal Place of Business:**

545 DRYDEN CIRCLE  
COCOA, FL 32926

## **Current Mailing Address:**

6905 N. WICKHAM ROAD  
SUITE 501  
MELBOURNE, FL 32940

## **New Mailing Address:**

545 DRYDEN CIRCLE  
COCOA, FL 32926

FEI Number: 04-3607038

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BUESCHER, KEITH  
6905 N. WICKHAM ROAD  
SUITE 501  
MELBOURNE, FL 32940 US

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

EVERETT, JOHN  
235 DRYDEN CIRCLE  
COCOA, FL 32926 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: JOHN EVERETT

10/10/2011

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: PRES  
Name: GANIER, KALLY  
Address: 545 DRYDEN CIRCLE  
City-St-Zip: COCOA, FL 32926

Title: VP  
Name: RICHARD, KATY  
Address: 545 DRYDEN CIRCLE  
City-St-Zip: COCOA, FL 32926

Title: TRES  
Name: SLADE, SONYA  
Address: 545 DRYDEN CIRCLE  
City-St-Zip: COCOA, FL 32926

Title: SEC  
Name: EVERETT, JOHN  
Address: 545 DRYDEN CIRCLE  
City-St-Zip: COCOA, FL 32926

Title: ME  
Name: DAVIS, JOHN  
Address: 545 DRYDEN CIRCLE  
City-St-Zip: COCOA, FL 32926

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: JOHN EVERETT

SEC

10/10/2011

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