

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000016503

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** PINE KNOLLS PARTNERS, LLC

**Current Principal Place of Business:**

806 QUITMAN HWY. NORTH  
GREENVILLE, FL 32331

**New Principal Place of Business:**

**Current Mailing Address:**

806 QUITMAN HWY. NORTH  
GREENVILLE, FL 32331

**New Mailing Address:**

**FEI Number:** 59-1437985

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOYD, STEPHANIE R  
806 QUITMAN HWY. NORTH  
GREENVILLE, FL 32331 US

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

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

**MANAGING MEMBERS/MANAGERS:**

**Title:** P  
**Name:** MATHIS, CAROL BERGER  
**Address:** 129 KIMBERLY RD  
**City-St-Zip:** EAST GRANBY, CT 06026

**Title:** ST  
**Name:** BERGER, EDWARD JOHN  
**Address:** 12 STILLMAN LN  
**City-St-Zip:** PLEASANTVILLE, NY 10570

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:** STEPHANIE R BOYD

MRS

01/06/2011

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