

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000022885

FILED  
Feb 02, 2012  
Secretary of State

Entity Name: TERRELL/STRICKLAND, LLC

**Current Principal Place of Business:**

430 PRIME POINT, SUITE 103  
C/O HISTORICAL CONCEPTS  
PEACHTREE CITY, GA 30269 US

**New Principal Place of Business:**

**Current Mailing Address:**

430 PRIME POINT, SUITE 103  
C/O HISTORICAL CONCEPTS  
PEACHTREE CITY, GA 30269 US

**New Mailing Address:**

FEI Number: 54-2072972

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROGERS, WILLIAM S JR.  
50 NORTH LAURA STREET  
SUITE 2200, BANK OF AMERICA TOWER  
JACKSONVILLE, FL 32202 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: MGR  
Name: TERRELL, JOSEPH H  
Address: 430 PRIME POINT, SUITE 103  
City-St-Zip: PEACHTREE CITY, GA 30269

Title: MGR  
Name: STRICKLAND, JOHNSTON T  
Address: 430 PRIME POINT, SUITE 103  
City-St-Zip: PEACHTREE CITY, GA 30269

Title: MGR  
Name: STRICKLAND, JAMES L  
Address: 430 PRIME POINT, SUITE 103  
City-St-Zip: PEACHTREE CITY, GA 30269

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: TODD STRICKLAND

MGR

02/02/2012

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