

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000027446

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Entity Name:** CLOVERLEAF PROPERTIES, L.L.C.

**Current Principal Place of Business:**

4343 W NEWBERRY RD  
SUITE 18  
GAINESVILLE, FL 32607

**New Principal Place of Business:**

4881 NW 8 AVENUE  
STE 2  
GAINESVILLE, FL 32605

**Current Mailing Address:**

P.O. BOX 357010  
GAINESVILLE, FL 32635

**New Mailing Address:**

P.O. BOX 357010  
GAINESVILLE, FL 326357010

**FEI Number:** 02-0649275

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KRUEGER, SCOTT DAVID  
2750 NW 43RD STREET STE. 201  
GAINESVILLE, FL 32606 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:** MGRM  
**Name:** BRANNEN, JESSE C  
**Address:** 4881 NW 8 AVENUE, STE 2  
**City-St-Zip:** GAINESVILLE, FL 32605

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:** JESSE C BRANNEN

MGRM

01/09/2012

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