

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024697

Entity Name: ARKMISS, LLC

FILED  
Feb 18, 2008  
Secretary of State

## Current Principal Place of Business:

36474 EMERALD COAST PKWY  
SUITE 4202  
DESTIN, FL 32541

## New Principal Place of Business:

## Current Mailing Address:

36474 EMERALD COAST PKWY  
SUITE 4202  
DESTIN, FL 32541

## New Mailing Address:

4705 SOMERS AVENUE  
NORTH LITTLE ROCK, AR 72116

FEI Number: 02-0697671

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LOVELACE, DEWITT M SR.  
36474 EMERALD COAST PKWY  
SUITE 4202  
DESTIN, FL 32541 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 ( ) Delete  
Name: LOVELACE, DEWITT M SR.  
Address: 36474 EMERALD COAST PKWY. SUITE 4202  
City-St-Zip: DESTIN, FL 32541

Title: MGRM ( ) Delete  
Name: TURNER, TAB  
Address: 4705 SOMERS AVENUE  
City-St-Zip: NORTH LITTLE ROCK, AR 72116

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: TAB TURNER

MGRM

02/18/2008

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