

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035946

FILED  
Feb 25, 2012  
Secretary of State

**Entity Name:** RESIDENCE REVIVAL, L.L.C.

**Current Principal Place of Business:**

937 FLEMING STREET  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

30924 N. 78TH PLACE  
SCOTTSDALE, AZ 85266

**New Mailing Address:**

30924 N. 78TH PLACE  
SCOTTSDALE, AZ 85266 US

**FEI Number:** 61-1457538

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIAMS, RICKEY R  
937 FLEMING STREET  
KEY WEST, FL 33040 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:** WILLIAMS, RICKEY R  
**Address:** 30924 N. 78TH PLACE  
**City-St-Zip:** SCOTTSDALE, AZ 85266

**Title:** MGRM  
**Name:** WILLIAMS, CHRISTINE M  
**Address:** 30924 N. 78TH PLACE  
**City-St-Zip:** SCOTTSDALE, AZ 85266

**Title:** MGRM  
**Name:** JOHNSON, MARK  
**Address:** 5791 230TH STREET EAST  
**City-St-Zip:** ELKO, MN 55020

**Title:** MGRM  
**Name:** JOHNSON, ANN  
**Address:** 5791 230TH STREET EAST  
**City-St-Zip:** ELKO, MN 55020

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:** RICKEY R. WILLIAMS

MGRM

02/25/2012

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