

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000041125

Entity Name: CAROLINA CABIN, LLC

**FILED**  
**Feb 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

8165 S. TROPICAL TRAIL  
MERRITT ISLAND, FL 32952

**New Principal Place of Business:**

**Current Mailing Address:**

8165 S. TROPICAL TRAIL  
MERRITT ISLAND, FL 32952

**New Mailing Address:**

FEI Number: 57-1206256

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NABERHAUS, TERRANCE W  
8165 S. TROPICAL TRAIL  
MERRITT ISLAND, FL 32952 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: NABERHAUS, TERRANCE W  
Address: 8165 S. TROPICAL TRAIL  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: MGRM  
Name: NABERHAUS, KAREN J  
Address: 8165 S. TROPICAL TRAIL  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: MGRM  
Name: MCGINNIS, JAMES D  
Address: 700 CENTRAL BLVD.  
City-St-Zip: MELBOURNE, FL 329014232

Title: MGRM  
Name: MCGINNIS, LORRAINE K  
Address: 700 CENTRAL BLVD.  
City-St-Zip: MELBOURNE, FL 329014232

Title: MGRM  
Name: NIELSEN, KEITH A  
Address: 2225 KEYSTONE AVENUE  
City-St-Zip: MELBOURNE, FL 329046148

Title: MGRM  
Name: NIELSEN, JENAI E  
Address: 2225 KEYSTONE AVENUE  
City-St-Zip: MELBOURNE, FL 329046148

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: TERRANCE W NABERHAUS

MGRM

02/27/2012

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