

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000050723

Entity Name: SCHANTZ FLORIDA, LLC

FILED
Jan 18, 2011
Secretary of State

Current Principal Place of Business:

233 PABLO ROAD
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

233 PABLO ROAD
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 20-1411987

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLOODWORTH, SUSAN S ESQ
170 MALAGA STREET
ST. AUGUSTINE, FL 32084 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: SCHANTZ, FREDERICK W
Address: 233 PABLO ROAD
City-St-Zip: PONTE VEDRA, FL 32082 US

Title: MGRM
Name: SCHANTZ, FREDERICK W
Address: 233 PABLO ROAD
City-St-Zip: PONTE VEDRA, FL 32082

Title: MGRM
Name: SCHANTZ, FREDERICK W
Address: 233 PABLO ROAD
City-St-Zip: PONTE VEDRA, FL 32082

Title: MGRM
Name: SCHANTZ, FREDERICK W
Address: 233 PABLO ROAD
City-St-Zip: PONTE VEDRA, FL 32082

Title: MGRM
Name: SCHANTZ, FREDERICK W
Address: 233 PABLO ROAD
City-St-Zip: PONTE VEDRA, FL 32082

Title: MGRM
Name: SCHANTZ, FREDERICK W
Address: 233 PABLO ROAD
City-St-Zip: PONTE VEDRA, FL 32082

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: FREDERICK W SCHANTZ

MANA

01/18/2011

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