

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000064524

Entity Name: SUMMERPORT LAND, LLC

FILED  
Feb 01, 2010  
Secretary of State

## Current Principal Place of Business:

527 MAIN STREET  
WINDERMERE, FL 34786

## New Principal Place of Business:

213 S DILLARD ST  
STE 210  
WINTER GARDEN, FL 34787

## Current Mailing Address:

527 MAIN STREET  
WINDERMERE, FL 34786

## New Mailing Address:

213 S DILLARD ST  
STE 210  
WINTER GARDEN, FL 34787

FEI Number: 37-1501563

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KARR, THOMAS J  
527 MAIN STREET  
WINDERMERE, FL 34786 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: ALLEN, DONALD R  
Address: 213 S DILLARD ST STE 210  
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGRM  
Name: KARR, THOMAS J JR  
Address: P O BOX 135  
City-St-Zip: WINDERMERE, FL 34787

Title: MGRM  
Name: BROWN, LEE G  
Address: 1333 2ND STREET NE STE 207  
City-St-Zip: HICKORY, NC 28601

Title: MGRM  
Name: HAGER, THOMAS  
Address: 13900 CONLAN CIR STE 240  
City-St-Zip: CHARLOTTE, NC 28601

Title: MGRM  
Name: BERRY, RICK  
Address: 100 MAIN AVE NW STE 500  
City-St-Zip: HICKORY, NC 28601

Title: MGRM  
Name: NEILL, EDWARD  
Address: 2965 TATE BLVD SE  
City-St-Zip: HICKORY, NC 28601

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: DONALD R ALLEN JR

MGRM

02/01/2010

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