

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000073038

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

**Entity Name:** GADSDEN FORTRESS, LLC

**Current Principal Place of Business:**

119 EAST PARK AVENUE  
SUITE 2-C  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

119 EAST PARK AVENUE  
SUITE 2-C  
TALLAHASSEE, FL 32301

**New Mailing Address:**

**FEI Number:** 20-1708628

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WINN, JASON D  
119 EAST PARK AVE.  
SUITE 2-C  
TALLAHASSEE, FL 32301 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:** MGMR  
**Name:** WINN, JASON D ESQ.  
**Address:** 119 EAST PARK AVENUE, SUITE 2-C  
**City-St-Zip:** TALLAHASSEE, FL 32301

**Title:** MGR  
**Name:** WINN, STEPHEN R  
**Address:** PO BOX 1675  
**City-St-Zip:** TALLAHASSEE, FL 32302

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: JASON D. WINN

MGMR

02/27/2012

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