

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000086790

**Entity Name:** ABC WAKULLA FARMS, LLC

**FILED**  
**Jan 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3908 W. MILLERS BRIDGE ROAD  
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

**Current Mailing Address:**

3908 W. MILLERS BRIDGE ROAD  
TALLAHASSEE, FL 32312

**New Mailing Address:**

**FEI Number:** 20-1945538

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PROCTOR, M. JULIAN JR  
227 S. CALHOUN STREET  
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:** MGR  
**Name:** COGNETTA, ARMAND B JR  
**Address:** 3908 W MILLERS BRIDGE RD  
**City-St-Zip:** TALLAHASSEE, FL 32312

**Title:** MGR  
**Name:** COGNETTA, SUZANNE  
**Address:** 3908 W MILLERS BRIDGE RD  
**City-St-Zip:** TALLAHASSEE, FL 32312

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:** ARMAND B. COGNETTA, JR., M.D.

MGR

01/30/2012

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