

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000091751

FILED  
Apr 05, 2012  
Secretary of State

Entity Name: DARREN GAGE FAMILY, L.L.C.

**Current Principal Place of Business:**

2125 WATER KEY DRIVE  
WINDERMERE, FL 34786

**New Principal Place of Business:**

**Current Mailing Address:**

2125 WATER KEY DRIVE  
WINDERMERE, FL 34786

**New Mailing Address:**

FEI Number: 59-3793595

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAVIGNE, JAMES R  
7087 GRAND NATIONAL DRIVE, SUITE 100  
LAVIGNE, COTON & ASSOCIATES, P.A.  
ORLANDO, FL 32819 US

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

FUN IN THE SUN OF CENTRAL FLORIDA INC  
2125 WATER KEY DR  
WINDERMERE, FL 34786 US

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: D. GAGE

04/05/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GAGE, DARREN P MR  
Address: 2125 WATER KEY DRIVE  
City-St-Zip: WINDERMERE, FL 34786 US

Title: MGRM  
Name: GAGE, LESLEY F MRS  
Address: 2125 WATER KEY DRIVE  
City-St-Zip: WINDERMERE, FL 34786 US

Title: MGRM  
Name: GAGE, MATTHEW A  
Address: 2125 WATER KEY DRIVE  
City-St-Zip: WINDERMERE, FL 34786 US

Title: MGRM  
Name: GAGE, NATASHA B  
Address: 2125 WATER KEY DRIVE  
City-St-Zip: WINDERMERE, FL 34786 US

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: D. GAGE

MGRM

04/05/2012

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