

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000092961

**FILED**  
**Feb 17, 2012**  
**Secretary of State**

**Entity Name:** FEARINGTON & SMITH, LLC

**Current Principal Place of Business:**

119 SOUTH MONROE STREET SUITE 201  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1548  
TALLAHASSEE, FL 32302

**New Mailing Address:**

**FEI Number:** 20-2038449

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BREWSTER, JAMES R  
547 N. MONROE STREET  
SUITE 203  
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:** MGRM  
**Name:** SMITH, J. CLARK  
**Address:** 1319 LEMOND STREET  
**City-St-Zip:** TALLAHASSEE, FL 32308

**Title:** MGRM  
**Name:** FEARINGTON, MERCER JR  
**Address:** 9900 VETERANS MEMORIAL DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32309

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:** J. CLARK SMITH

MGRM

02/17/2012

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