

2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000000441

FILED
Aug 26, 2011
Secretary of State

Entity Name: TILLMAN FAMILY LIMITED LIABILITY COMPANY

Current Principal Place of Business:

125 N E SANTA FE BLVD
HIGH SPRINGS, FL 32643

New Principal Place of Business:

125 N E SANTA FE BLVD
HIGH SPRINGS, FL 32643 US

Current Mailing Address:

125 NE SANTA FE BLVD
HIGH SPRINGS, FL 32643

New Mailing Address:

125 N E SANTA FE BLVD
HIGH SPRINGS, FL 32643 US

FEI Number: 59-3426776

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TILLMAN, FLOYD E
1705 S.E. PALM AVENUE
HIGH SPRINGS, FL 32643 US

Name and Address of New Registered Agent:

TILLMAN, AMY S
125 NE SANTA FE BLVD
HIGH SPRINGS, FL 32643 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: AMY S. TILLMAN

08/26/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: TILLMAN, AMY S
Address: 125 NE SANTA FE BLVD
City-St-Zip: HIGH SPRINGS, FL 32643 US

Title: MGRM
Name: TOMLINSON, MARIAN
Address: 125 NE SANTA FE BLVD
City-St-Zip: HIGH SPRINGS, FL 32643 US

Title: MGRM
Name: TILLMAN, DIANNE
Address: 125 NE SANTA FE BLVD
City-St-Zip: HIGH SPRINGS, FL 32643 US

Title: MGRM
Name: TILLMAN, CAROLYN
Address: 125 NE SANTA FE BLVD
City-St-Zip: HIGH SPRINGS, FL 32643 US

Title: MGRM
Name: WOODEN, TERESA
Address: 125 NE SANTA FE BLVD
City-St-Zip: HIGH SPRINGS, FL 32643 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: AMY S. TILLMAN

MGRM

08/26/2011

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