

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000023209

Entity Name: ACREAGE LLC

**FILED**  
**Mar 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5771 DIXIE BELL RD  
ATTN: LYNDA M. DUNVILLE  
PALM BEACH GARDENS, FL 33418

**New Principal Place of Business:**

**Current Mailing Address:**

5771 DIXIE BELL RD  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

5771 DIXIE BELL RD  
ATTN: LYNDA M. DUNVILLE  
PALM BEACH GARDENS, FL 33418

FEI Number: 54-2168778

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DUNVILLE, LYNDA H  
5771 DIXIE BELL RD  
PALM BEACH GARDENS, FL 33418 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: DUNVILLE, LYNDA  
Address: 5771 DIXIE BELL  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM  
Name: MERRIMAN, RUSSELL  
Address: 535 BROOKSIDE  
City-St-Zip: YPSILANTI, MI 48197

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: LYNDA M DUNVILLE

MGR

03/26/2012

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