

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000032492

**Entity Name:** LAS MONTANAS, LLC

**FILED**  
**May 12, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4472 BAY POINT ROAD  
PANAMA CITY, FL 32411

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 27434  
PANAMA CITY, FL 32411

**New Mailing Address:**

**FEI Number:** 20-5170160      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

MCCLURE, CHARLES D  
825 THOMASVILLE ROAD  
TALLAHASSEE, FL 32303      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** LUBIN, BARBARA A  
**Address:** 4472 BAY POINT ROAD  
**City-St-Zip:** PANAMA CITY, FL 32411

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: BARBARA LUBIN

MGRM

05/12/2010

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