

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000042064

Entity Name: GATOR NATION, LLC

FILED  
May 01, 2009  
Secretary of State

## Current Principal Place of Business:

P.O. BOX 140062  
GAINESVILLE, FL 32614

## New Principal Place of Business:

2403 NW 202ND STREET  
NEWBERRY, FL 32669

## Current Mailing Address:

P.O. BOX 140062  
GAINESVILLE, FL 32614

## New Mailing Address:

2403 NW 202ND STREET  
NEWBERRY, FL 32669

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)  
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:

BROWN, DARLENE J  
14918 SW 162ND ST.  
ARCHER, FL 32618 US

## Name and Address of New Registered Agent:

FOUST-BROWN, DARLENE J  
2403 NW 202ND STREET  
NEWBERRY, FL 32669 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: DARLENE J. FOUST-BROWN

05/01/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: BROWN, DARLENE J  
Address: P.O. BOX 140062  
City-St-Zip: GAINESVILLE, FL 32614

Title: MGRM (X) Delete  
Name: BROWN, CHARLES O  
Address: 11753 SW 158TH STREET  
City-St-Zip: ARCHER, FL 32618

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: FOUST-BROWN, DARLENE J  
Address: 2403 NW 202ND STREET  
City-St-Zip: NEWBERRY, FL 32669

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DARLENE J. FOUST-BROWN

MGR

05/01/2009

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