

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000052026

FILED
Apr 28, 2011
Secretary of State

Entity Name: OLDE CYPRESS HOUSE, LLC

Current Principal Place of Business:

154 NORTH BRIDGE ST.
LABELLE, FL 33935

New Principal Place of Business:

253 S CYPRESS ST
LABELLE, FL 33935

Current Mailing Address:

P.O. BOX 482
LABELLE, FL 33975

New Mailing Address:

FEI Number: 20-2843545

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKS, CHASSEY J
455 BELMONT ST
LABELLE, FL 33935 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: HICKS, CHASSEY J
Address: PO BOX 482
City-St-Zip: LABELLE, FL 33935

Title: MGRM
Name: WILKINS, JULIE C
Address: PO BOX 2638
City-St-Zip: LABELLE, FL 33975

Title: MGRM
Name: WILKINS, WAYNE L
Address: PO BOX 2638
City-St-Zip: LABELLE, FL 33975

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: CHASSEY J HICKS

MGRM

04/28/2011

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