

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000060855

Entity Name: MOCCASIN VILLAGE, LLC

FILED
Feb 16, 2011
Secretary of State

Current Principal Place of Business:

8215 BLAIKE CT
113
SARASOTA, FL 34240

New Principal Place of Business:

8215 BLAIKE CT
113
SARASOTA, FL 34240 US

Current Mailing Address:

8215 BLAIKE CT
113
SARASOTA, FL 34240

New Mailing Address:

8215 BLAIKE CT
113
SARASOTA, FL 34240 US

FEI Number: 20-3024630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DIVALD, YARON
8215 BLAIKE CT
113
SARASOTA, FL 34240 US

Name and Address of New Registered Agent:

DEVALD, YARON
8215 BLAIKE CT
113
SARASOTA, FL 34240 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: YARON DEVALD

02/16/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: DEVALD, YARON
Address: 8215 BLAIKE CT
City-St-Zip: SARASOTA, FL 34240 US

Title: MGRM
Name: DEVALD, YARON
Address: 8215 BLAIKE CT
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Title: NGRM
Name: DEVALD, YARON
Address: 8215 BLAIKE CT
City-St-Zip: SARASOTA, FL 34240 US

Title: MGRM
Name: DEVALD, YARON
Address: 8215 BLAIKE CT
City-St-Zip: SARASOTA, FL 34240 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: YARON DEVALD

MGRM

02/16/2011

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