

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000094599

Entity Name: THE POINTE, L.L.C.

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2111 N. GOLFVIEW DRIVE  
PLANT CITY, FL 33566

**New Principal Place of Business:**

**Current Mailing Address:**

2111 N. GOLFVIEW DRIVE  
PLANT CITY, FL 33566

**New Mailing Address:**

FEI Number: 20-3872039

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CLOSSHEY, JENNIFER E  
2111 N GOLFVIEW DR  
PLANT CITY, FL 33566 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: CLOSSHEY FAMILY LIMITED PARTNERSHIP  
Address: 2111 N GOLFVIEW DR  
City-St-Zip: PLANT CITY, FL 33566 US

Title: MGRM  
Name: CLOSSHEY ENTERPRISES, INC. GENERAL PARTNER  
Address: 2111 N GOLFVIEW DR  
City-St-Zip: PLANT CITY, FL 33566 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: JENNIFER E CLOSSHEY

MGRM

04/20/2011

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