

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000102815

Entity Name: WAKULLA CENTRE, LLC

FILED
Apr 22, 2011
Secretary of State

Current Principal Place of Business:

1990 CRAWFORDVILLE HIGHWAY
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

1990 CRAWFORDVILLE HIGHWAY
CRAWFORDVILLE, FL 32327 UN

Current Mailing Address:

PO BOX 181309
CASSELBERRY, FL 32718 US

New Mailing Address:

PO BOX 1237
CRAWFORDVILLE, FL 32326

FEI Number: 61-1518345

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ABRAHAM, BARRY
1990 CRAWFORDVILLE HIGHWAY
CRAWFORDVILLE, FL 32327 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: ABRAHAM, BARRY
Address: POST OFFICE BOX 1237
City-St-Zip: CRAWFORDVILLE, FL 32326

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: BARRY ABRAHAM

MGRM

04/22/2011

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