

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000107424

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** HICKORY BRANCH RIDGE VII LLC

**Current Principal Place of Business:**

599 SUNSET POINTE DR  
LAKE PLACID, FL 33852

**New Principal Place of Business:**

599 SUNSET POINTE DR  
LAKE PLACID, FL 33852 UN

**Current Mailing Address:**

599 SUNSET POINTE DR  
LAKE PLACID, FL 33852

**New Mailing Address:**

**FEI Number:** 20-3848324      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

LEBLANC, KENNETH E  
599 SUNSET POINTE DR  
LAKE PLACID, FL 33852 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:** MGR  
**Name:** LEBLANC, KENNETH E  
**Address:** 599 SUNSET POINTE DR  
**City-St-Zip:** LAKE PLACID, FL 33852

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: KEN LEBLANC

MGR

04/10/2012

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