

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000004578

**FILED**  
**Mar 30, 2011**  
**Secretary of State**

**Entity Name:** 801 EAST KING AVE KINGSLAND GA LLC

**Current Principal Place of Business:**

2640-204 BLANDING BLVD  
SUITE 407  
MIDDLEBURG, FL 32068

**New Principal Place of Business:**

226A ST JOE PLAZA DR  
PMB 159  
PALM COAST, FL 32164

**Current Mailing Address:**

2640-204 BLANDING BLVD  
SUITE 407  
MIDDLEBURG, FL 32068

**New Mailing Address:**

226A ST JOE PLAZA DR  
PMB 159  
PALM COAST, FL 32164

**FEI Number:** 26-1079850

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLORIDA DEVELOPMENT AND LAND INC.  
2640-204 BLANDING BLVD STE 407  
MIDDLEBURG, FL 32068 US

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

FLORIDA DEVELOPMENT AND LAND INC.  
226A ST JOE PLAZA DR  
PMB 159  
PALM COAST, FL 32164 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: \_\_\_\_\_

03/30/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SPOONER, JAMES C  
Address: 226A ST JOE PLAZA DR PMB 159  
City-St-Zip: PALM COAST, FL 32164

Title: ST  
Name: SPOONER, CARRIE A  
Address: 226A ST JOE PLAZA DR PMB 159  
City-St-Zip: PALM COAST, FL 32164

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: CARRIE SPOONER

ST

03/30/2011

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