

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000018519

Entity Name: BUFFALO GRASS, LLC

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5871 GULF OF MEXICO DRIVE  
LONGBOAT KEY, FL 34228

**New Principal Place of Business:**

1626 RINGLING BLVD  
STE 500  
SARASOTA, FL 34236

**Current Mailing Address:**

P.O. BOX 1861  
MUSKOGEE, OK 74402

**New Mailing Address:**

FEI Number: 20-4351729

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

ROBERTS, CARLILE  
1918 N. 11TH ST.  
MUSKOGEE, FL 74401 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: CHARLES PALMER INTER VIVOS TRUST 3/12/93  
Address: 5871 GULF OF MEXICO DRIVE  
City-St-Zip: LONGBOAT KEY, FL 34228 US

Title: MGR  
Name: R. CARLILE ROBERTS TRUST  
Address: 1918 N. 11TH STREET  
City-St-Zip: MUSKOGEE, OK 74401 US

Title: MGR  
Name: JOHN REYNOLDS INTERVIVOS TRUST  
Address: 1918 N. 11TH  
City-St-Zip: MUSKOGEE, OK 74401 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: R CARLILE ROBERTS

PTNR

04/22/2010

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