

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000052575

Entity Name: OUTDOOR ESCAPES, LLC

**FILED**  
**Mar 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

23315 NW 200TH LANE  
HIGH SPRINGS, FL 32643 US

**New Principal Place of Business:**

27424 NW 193RD AVE  
HIGH SPRINGS, FL 32643 US

**Current Mailing Address:**

P.O. BOX 2791  
HIGH SPRINGS, FL 32655 US

**New Mailing Address:**

27424 NW 193RD AVE  
HIGH SPRINGS, FL 32643 US

FEI Number: 20-5125059

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NYSTROM, DONALD E  
27424 NW 193RD AVE.  
HIGH SPRINGS, FL 32643 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: NYSTROM, DONALD E  
Address: 27424 NW 193RD AVE  
City-St-Zip: HIGH SPRINGS, FL 32643 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: DONALD E. NYSTROM

MM

03/04/2012

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