

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000062860

**FILED**  
**Mar 05, 2010**  
**Secretary of State**

**Entity Name:** JC LINN OF COMANCHE, LLC

**Current Principal Place of Business:**

16611 WILLOW GLEN DR  
ODESSA, FL 33556 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 270392  
TAMPA, FL 33688 US

**New Mailing Address:**

**FEI Number:** 20-5075817

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHANNON, JEFFREY C  
501 EAST KENNEDY BLVD  
SUITE 1700  
TAMPA, FL 33602 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: LINN, JEFFREY N  
Address: PO BOX 270392  
City-St-Zip: TAMPA, FL 33688 US

Title: MGR  
Name: LINN, CRAIG  
Address: P.O. BOX 270392  
City-St-Zip: TAMPA, FL 33688 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: JEFFREY N. LINN

MGRM

03/05/2010

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