

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000067730

Entity Name: NEVERDUNN LLC

FILED  
Jan 05, 2011  
Secretary of State

**Current Principal Place of Business:**

929 SW OLD WIRE RD  
LAKE CITY, FL 32024 US

**New Principal Place of Business:**

**Current Mailing Address:**

929 SW OLD WIRE RD  
LAKE CITY, FL 32024 US

**New Mailing Address:**

FEI Number: 74-3189761

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REGISTERED AGENTS LEGAL SERVICES, INC.  
155 OFFICE PLAZA DR.  
SUITE A  
TALLAHASSEE, FL 32301 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: BEAKES, DAVID C  
Address: 929 SW OLD WIRE RD  
City-St-Zip: LAKE CITY, FL 32024 US

Title: MGRM  
Name: FREEMAN, CHRISTEL L  
Address: 903 SW OLD WIRE RD  
City-St-Zip: LAKE CITY, FL 32024 US

Title: MGRM  
Name: BEAKES, SANDRA L  
Address: 929 SW OLD WIRE RD  
City-St-Zip: LAKE CITY, FL 32024 US

Title: MGRM  
Name: FREEMAN, BRIAN  
Address: 903 SW OLD WIRE RD  
City-St-Zip: LAKE CITY, FL 32024 US

Title: MEMB  
Name: DUNN, LORINE  
Address: 4155 COQUINA AVE  
City-St-Zip: TITUSVILLE, FL 32780 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: DAVID C BEAKES

CFO

01/05/2011

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