

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000083999

**FILED**  
**Jul 17, 2012**  
**Secretary of State**

**Entity Name:** OCALA COMMUNITY HOUSING, LLC

**Current Principal Place of Business:**

17918 NE US HWY 301  
WALDO, FL 32694

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 236  
HIGH SPRINGS, FL 32643

**New Mailing Address:**

PO BOX 236  
HIGH SPRINGS, FL 32643 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

FRANCIS, JASON E  
17918 NE US HWY 301  
WALDO, FL 32694 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: FRANCIS, JASON E  
Address: PO BOX 236  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: MGR  
Name: FITZWILLIAM, IAN  
Address: PO BOX 236  
City-St-Zip: HIGH SPRINGS, FL 32643

Title: MGR  
Name: O'BRIEN, DAVID  
Address: PO BOX 236  
City-St-Zip: HIGH SPRINGS, FL 32643

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:** JASON FRANCIS

MGRM

07/17/2012

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