

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000086453

**Entity Name:** WHITE ROCK MOUNTAIN, LLC

**FILED**  
**Jan 13, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1180 WEST WASHINGTON STREET  
MONTICELLO, FL 32344

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 564  
MONTICELLO, FL 32345

**New Mailing Address:**

P. O. BOX 12668  
TALLAHASSEE, FL 32317

**FEI Number:** 74-3188517

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PALMER, RILEY  
1180 WEST WASHINGTON STREET  
MONTICELLO, FL 32344 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: PALMER, RILEY  
Address: P. O. BOX 564  
City-St-Zip: MONTICELLO, FL 32345 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: RILEY PALMER

PRES

01/13/2011

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