

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000113231

FILED
Mar 19, 2011
Secretary of State

Entity Name: ASSOCIATION & CONFERENCE MANAGEMENT, LLC.

Current Principal Place of Business:

1608 METROPOLITAN CIRCLE
SUITE B
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

1919 VINELAND LANE
TALLAHASSEE, FL 32317 US

Current Mailing Address:

POST OFFICE BOX 38070
TALLAHASSEE, FL 32315 US

New Mailing Address:

FEI Number: 56-2624990

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, EUGENE B
1608 METROPOLITAN CIRCLE
SUITE B
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

JONES, EUGENE B
1919 VINELAND LANE
TALLAHASSEE, FL 32317 US

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: EUGENE B. JONES

03/19/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: JONES, GENE
Address: POST OFFICE BOX 38070
City-St-Zip: TALLAHASSEE, FL 32315

Title: MGRM
Name: JONES, DANA
Address: POST OFFICE BOX 38070
City-St-Zip: TALLAHASSEE, FL 32315

Title: MGRM
Name: MOREAU, RAY
Address: POST OFFICE BOX 38070
City-St-Zip: TALLAHASSEE, FL 32315

Title: MGRM
Name: MAYFIELD, NICKI
Address: POST OFFICE BOX 38070
City-St-Zip: TALLAHASSEE, FL 32315

Title: MGRM
Name: ARMSTRONG, HEATHER
Address: POST OFFICE BOX 38070
City-St-Zip: TALLAHASSEE, FL 32315

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: EUGENE JONES

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03/19/2011

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