

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000000620

Entity Name: NEW RIVER, LLC

FILED
Feb 02, 2011
Secretary of State

Current Principal Place of Business:

100 COLONIAL CENTER PARKWAY, SUITE 470
LAKE MARY, FL 32746

New Principal Place of Business:

237 S. WESTMONTE DRIVE, SUITE 140
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

100 COLONIAL CENTER PARKWAY, SUITE 470
LAKE MARY, FL 32746

New Mailing Address:

237 S. WESTMONTE DRIVE, SUITE 140
ALTAMONTE SPRINGS, FL 32714

FEI Number: 20-8155597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF ORLANDO
300 SOUTH ORANGE AVENUE
STE. 1000 (DTO)
ORLANDO, FL 32801 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: OGIER, GERALD D
Address: 237 S. WESTMONTE DRIVE, SUITE 140
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VTS
Name: SCHAFFER, JOHN A
Address: 237 S. WESTMONTE DRIVE, SUITE 140
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: V
Name: OGIER, STEVEN
Address: 237 S. WESTMONTE DRIVE, SUITE 140
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: V
Name: OGIER, MARK
Address: 237 S. WESTMONTE DRIVE, SUITE 140
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: JOHN SCHAFFER

VTS

02/02/2011

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