

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000013987

FILED  
Mar 02, 2010  
Secretary of State

Entity Name: LGI CABIN, LLC

**Current Principal Place of Business:**

500 N WILLOW AVE STE 101  
TAMPA, FL 33606 US

**New Principal Place of Business:**

**Current Mailing Address:**

500 N WILLOW AVE STE 101  
TAMPA, FL 33606 US

**New Mailing Address:**

FEI Number: 20-8398138

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILKINSON, CAROLYN V  
500 N WILLOW AVE STE 101  
TAMPA, FL 33606 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: WILKINSON, CAROLYN V  
Address: 500 N. WILLOW AVENUE, SUITE 101  
City-St-Zip: TAMPA, FL 33606

Title: MGRM  
Name: SIEFKER, GREG  
Address: 7480 LADSON TERRACE  
City-St-Zip: LAKE WORTH, FL 33606

Title: MGRM  
Name: SIEFKER, LINDA  
Address: 7480 LADSON TERRACE  
City-St-Zip: LAKEWORTH, FL 33606

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: CAROLYN V WILKINSON

MGR

03/02/2010

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