

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000013987

Entity Name: LGI CABIN, LLC

FILED  
Feb 29, 2012  
Secretary of State

## Current Principal Place of Business:

500 N WILLOW AVE STE 101  
SUITE 101  
TAMPA, FL 33606 US

## New Principal Place of Business:

1407 5TH AVENUE  
TAMPA, FL 33605 US

## Current Mailing Address:

500 N WILLOW AVE STE 101  
SUITE 101  
TAMPA, FL 33606 US

## New Mailing Address:

1407 5TH AVENUE  
TAMPA, FL 33605 US

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 MANAGER  
500 N WILLOW AVE STE 101  
SUITE 101  
TAMPA, FL 33606 US

## Name and Address of New Registered Agent:

WILKINSON, CAROLYN V  
1407 5TH AVENUE  
TAMPA, FL 33605 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: CAROLYN V WILKINSON

02/29/2012

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MS  
Name: WILKINSON, CAROLYN V  
Address: 1407 5TH AVENUE  
City-St-Zip: TAMPA, FL 33605 US

Title: MR  
Name: SIEFKER, GREG  
Address: 7480 LADSON TERRACE  
City-St-Zip: LAKE WORTH, FL 33467

Title: MS  
Name: SIEFKER, LINDA  
Address: 7480 LADSON TERRACE  
City-St-Zip: LAKEWORTH, FL 33467

Title: MS  
Name: WILKINSON, CAROLYN  
Address: 1407 5TH AVENUE  
City-St-Zip: TAMPA, FL 33605

Title: MR  
Name: WILKINSON, GREGORY  
Address: 1407 5TH AVENUE  
City-St-Zip: TAMPA, FL 33605

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

MS.

02/29/2012

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