

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000023644

**FILED**  
**Mar 08, 2011**  
**Secretary of State**

**Entity Name:** FLOYD ENTERPRISES OF FLORIDA, LLC

**Current Principal Place of Business:**

1556 6TH STREET, SE  
WINTER HAVEN, FL 33880

**New Principal Place of Business:**

**Current Mailing Address:**

1556 6TH STREET, SE  
WINTER HAVEN, FL 33880

**New Mailing Address:**

**FEI Number:** 26-0181758

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAMMONS, ROBERT O  
1556 6TH STREET, SE  
WINTER HAVEN, FL 33880 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:** S  
**Name:** FLOYD, THOMAS C  
**Address:** 2411 BERSHIRE DR  
**City-St-Zip:** WINTER HAVEN, FL 33884

**Title:** GVP  
**Name:** FLOYD, CARL  
**Address:** 4 LAKE LINK DR SE  
**City-St-Zip:** WINTER HAVEN, FL 33884

**Title:** T  
**Name:** FLOYD, DEE A  
**Address:** 2411 BERSHIRE DR  
**City-St-Zip:** WINTER HAVEN, FL 33884

**Title:** GVP  
**Name:** FLOYD, KATHRYN  
**Address:** 4 LAKE LINK DR SE  
**City-St-Zip:** WINTER HAVEN, FL 33884

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:** THOMAS C. FLOYD

S

03/08/2011

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