

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000059033

FILED  
Mar 30, 2012  
Secretary of State

Entity Name: EARTH STEPS LLC

## Current Principal Place of Business:

3202 LAKE SHORE DRIVE  
TALLAHASSEE, FL 32312

## New Principal Place of Business:

3202 LAKESHORE DRIVE  
TALLAHASSEE, FL 32312

## Current Mailing Address:

3202 LAKE SHORE DRIVE  
TALLAHASSEE, FL 32312

## New Mailing Address:

3202 LAKESHORE DRIVE  
TALLAHASSEE, FL 32312

FEI Number: 26-1106772

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

NELSON, LINDA  
3202 LAKE SHORE DRIVE  
TALLAHASSEE, FL 32312 US

## Name and Address of New Registered Agent:

NELSON, LINDA  
3202 LAKESHORE DRIVE  
TALLAHASSEE, FL 32312 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:

03/30/2012

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: NELSON, LINDA  
Address: 3202 LAKE SHORE DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM  
Name: HALL, PAMELA  
Address: 5150 QUAIL VALLEY RD.  
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM  
Name: ROSS, KIM  
Address: 1603 SAULS STREET  
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM  
Name: ARMSTRONG, EVA B  
Address: 5277 QUAIL VALLEY RD.  
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM  
Name: DICK, MARC C  
Address: 3251 NEWBERRY BOULEVARD  
City-St-Zip: TALLAHASSEE, FL 32311

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: MARC C DICK

MGRM

03/30/2012

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