

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000096111

Entity Name: LITTLE POND FARM, LLC

**FILED**  
**Sep 16, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5920 CRUMP ROAD  
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

5290 CRUMP ROAD  
TALLAHASSEE, FL 32309

**Current Mailing Address:**

5920 CRUMP ROAD  
TALLAHASSEE, FL 32309

**New Mailing Address:**

5290 CRUMP ROAD  
TALLAHASSEE, FL 32309

FEI Number: 26-1119460

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BILLINGS, ROBERT K  
5920 CRUMP ROAD  
TALLAHASSEE, FL 32309 US

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

BILLINGS, ROBERT K  
5290 CRUMP ROAD  
TALLAHASSEE, FL 32309 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: ROBERT BILLINGS

09/16/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BILLINGS, ROBERT K  
Address: 5290 CRUMP ROAD  
City-St-Zip: TALLAHASSEE, FL 32309

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: ROBERT BILLINGS

MGRM

09/16/2010

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