

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000121386

FILED  
Feb 05, 2012  
Secretary of State

**Entity Name:** VOELKER SURVEYING, LLC

**Current Principal Place of Business:**

605 N COUNTY HWY 393  
UNIT 9C  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

110 LOGAN LANE  
SUITE 4  
SANTA ROSA BEACH, FL 32459

**Current Mailing Address:**

605 N COUNTY HWY 393  
UNIT 9C  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

110 LOGAN LANE  
SUITE 4  
SANTA ROSA BEACH, FL 32459

**FEI Number:** 35-2319080

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VOELKER, MICHELLE T  
1651 MAGNOLIA ROAD  
PONCE DE LEON, FL 32455 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: VOELKER, RONALD J JR  
Address: 110 LOGAN LANE, STE 4  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGR  
Name: VOELKER, MICHELLE T  
Address: 1651 MAGNOLIA ROAD  
City-St-Zip: PONCE DE LEON, FL 32455

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: MICHELLE VOELKER

MGR

02/05/2012

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