

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000001041

Entity Name: DEJA-VU, LLC

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

700 PIER PARK DRIVE  
SUITE 115  
PANAMA CITY BEACH, FL 32413

**New Principal Place of Business:**

**Current Mailing Address:**

790 N. COUNTY HWY 393, BLDG 2, UNIT C  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

790 N. COUNTY HWY 393, BLDG 3, UNIT B  
SANTA ROSA BEACH, FL 32459

FEI Number: 26-1823794

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WALLACE, CLINT  
1168 EAST TENNESSEE ST  
TALLAHASSEE, FL 32308 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: MGRM  
Name: FOX NICHOLS LLC  
Address: 2236 EAST HWY 30A #7  
City-St-Zip: SEASIDE, FL 32459

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: FOX NICHOLS, LLC

MGRM

01/09/2012

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