

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000001425

**FILED**  
**Apr 13, 2011**  
**Secretary of State**

**Entity Name:** OCHOLOCKNEE BAY COMMERCIAL, LLC

**Current Principal Place of Business:**

1311 JACKSON BLFF ROAD  
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

1311 JACKSON BLUFF ROAD  
TALLAHASSEE, FL 32304

**Current Mailing Address:**

P.O. BOX 20438  
TALLAHASSEE, FL 32316

**New Mailing Address:**

**FEI Number:** 26-4546955

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MANAUSA, DANIEL E  
3520 THOMASVILLE ROAD  
TALLAHASSEE, FL 32309 US

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

MANAUSA, DANIEL E  
1311 JACKSONBLUFF RD  
TALLAHASSEE, FL 32304 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/13/2011

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KASPER, JOSH  
Address: P.O. BOX 20438  
City-St-Zip: TALLAHASSEE, FL 32316

Title: MGRM  
Name: KASPER, ROB  
Address: P.O. BOX 20438  
City-St-Zip: TALLAHASSEE, FL 32316

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 KASPER

MGR

04/13/2011

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