

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000006703

Entity Name: PORTER OCALA, LLC

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

14200 SE HIGHWAY 441  
SUMMERFIELD, FL 34491

## **New Principal Place of Business:**

5111 SOUTH PINE AVE  
STE O  
OCALA, FL 34480

## **Current Mailing Address:**

14200 SE HIGHWAY 441  
SUMMERFIELD, FL 34491

## **New Mailing Address:**

5111 SOUTH PINE AVE  
STE O  
OCALA, FL 34480

FEI Number: 26-1792672

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LITTLE, THOMAS C  
2123 NE COACHMAN ROAD  
SUITE A  
CLEARWATER, FL 33765 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: PORTER, SEAN L  
Address: 5111 SOUTH PINE AVE, STE O  
City-St-Zip: Ocala, FL 34480

Title: MGR  
Name: PORTER, RICHARD M  
Address: 5111 SOUTH PINE AVE, STE O  
City-St-Zip: Ocala, FL 34480

Title: MGR  
Name: PORTER, JAMES F JR  
Address: 5111 SOUTH PINE AVE, STE O  
City-St-Zip: Ocala, FL 34480

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: SEAN L PORTER

MGR

04/28/2011

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