

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000014067

**FILED**  
**Feb 11, 2010**  
**Secretary of State**

**Entity Name:** SUMMERLIN'S BAYWOOD SMOKEHOUSE, LLC

**Current Principal Place of Business:**

4820 SOUTH U.S. 1  
UNIT 4844  
FORT PIERCE, FL 34982

**New Principal Place of Business:**

**Current Mailing Address:**

4820 SOUTH U.S. 1  
UNIT 4844  
FORT PIERCE, FL 34982

**New Mailing Address:**

**FEI Number:** 26-2000369

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

YATES & MANCINI, LLC  
311 SOUTH SECOND STREET  
SUITE 102  
FORT PIERCE, FL 34950 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:** SUMMERLIN, NORA  
**Address:** 1301 ZEPHYR AVENUE  
**City-St-Zip:** FORT PIERCE, FL 34982

**Title:** MGR  
**Name:** FOGAL, BRIAN  
**Address:** 1621 MALLARD COURT  
**City-St-Zip:** FORT PIERCE, FL 34982

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:** BRIAN FOGAL

MGR

02/11/2010

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