

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000024519

**FILED**  
**Mar 02, 2010**  
**Secretary of State**

**Entity Name:** CLUB HOUSE AMUSEMENTS OF FLORIDA, LLC

**Current Principal Place of Business:**

6177 ELMGROVE AVE  
JACKSONVILLE, FL 32244

**New Principal Place of Business:**

**Current Mailing Address:**

6177 ELMGROVE AVE  
JACKSONVILLE, FL 32244

**New Mailing Address:**

**FEI Number:** 27-0188404

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KILNA, JOHN W  
6177 ELMGROVE AVE  
JACKSONVILLE, FL 32244 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:** SHEILDS, EDWARD J  
**Address:** 440 N COMMERCE AVE  
**City-St-Zip:** WAYNESBORO, VA 22980

**Title:** MGR  
**Name:** KILNA, JOHN W  
**Address:** 6177 ELMGROVE AVE  
**City-St-Zip:** JACKSONVILLE, FL 32244

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:** JOHN W. KILNA

MGR

03/02/2010

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