

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000029541

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** 5718 OLD CHENEY HIGHWAY, LLC

**Current Principal Place of Business:**

110 EAST BROADWAY AVENUE, SUITE A  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 620460  
OVIEDO, FL 32762

**New Mailing Address:**

**FEI Number:** 59-6060269

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EVANS, CHARLES W  
110 E BROADWAY  
OVIEDO, FL 32765 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: EVANS GROVES, INC.  
Address: 110 EAST BROADWAY AVENUE, SUITE A  
City-St-Zip: OVIEDO, FL 32765

Title: P/D  
Name: EVANS, CHARLES W  
Address: 110 E BROADWAY  
City-St-Zip: OVIEDO, FL 32765

Title: VP/D  
Name: EVANS, DAVID L  
Address: 110 E BROADWAY  
City-St-Zip: OVIEDO, FL 32465

Title: VP/D  
Name: EVANS, JOHN W JR  
Address: 110 E BROADWAY  
City-St-Zip: OVIEDO, FL 32765

Title: ST/D  
Name: EVANS, ARTHUR F  
Address: 110 E BROADWAY  
City-St-Zip: OVIEDO, FL 32765

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: CHARLES W. EVANS

PRES

04/16/2012

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