

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000060595

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** MAG ENTERPRISES OF WAKULLA LLC

**Current Principal Place of Business:**

1884 WOODVILLE HWY  
CRAWFORDVILLE, FL 32327

**New Principal Place of Business:**

**Current Mailing Address:**

1884 WOODVILLE HWY  
CRAWFORDVILLE, FL 32327

**New Mailing Address:**

**FEI Number:** 26-4471393

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MEINHARDT, ANDREW  
1884 WOODVILLE HWY  
CRAWFORDVILLE, FL 32327 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:** CRISWELL, HIRAM M  
**Address:** 9141 OLD CHEMONIE RD  
**City-St-Zip:** TALLAHASSEE, FL 32309

**Title:** MGR  
**Name:** MEINHARDT, ANDREW  
**Address:** 712 RIVER PLANTATION RD  
**City-St-Zip:** CRAWFORDVILLE, FL 32327

**Title:** MGR  
**Name:** WILLIAMS, CECIL G  
**Address:** 46 KINSEY RD  
**City-St-Zip:** CRAWFORDVILLE, FL 32327

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:** ANDREW MEINHARDT

MR

03/30/2010

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