

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000074807

**FILED**  
**Mar 06, 2012**  
**Secretary of State**

**Entity Name:** FAIRBANK ENTERPRISES, LLC

**Current Principal Place of Business:**

1022 U.S. HIGHWAY 19  
HOLIDAY, FL 34691 US

**New Principal Place of Business:**

**Current Mailing Address:**

1022 U.S. HIGHWAY 19  
HOLIDAY, FL 34691 US

**New Mailing Address:**

**FEI Number:** 26-3193115

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FAIRBANK, WILLIAM W  
1930 ALECOST CT  
TRINITY, FL 34655 US

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

FAIRBANK, WILLIAM W  
6424 ALCESTER DR.  
TRINITY, FL 34655 US

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:**

03/06/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** FAIRBANK, WILLIAM W  
**Address:** 6424 ALCESTER DR.  
**City-St-Zip:** TRINITY, FL 34655

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:** WILLIAM W FAIRBANK

PRES

03/06/2012

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