

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000093774

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Entity Name:** INDIAN PASS HOLDINGS, LLC

**Current Principal Place of Business:**

110 DEEPWATER AVE.  
PORT ST. JOE, FL 23456 US

**New Principal Place of Business:**

**Current Mailing Address:**

424 ASPEN LANE  
COVINGTON, LA 70433 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

TAPE, KURT  
205 BLUE LAKE RD.  
SANTA ROSA BEACH, FL 32459 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: MGRM  
Name: TAPE, LARRY  
Address: 424 ASPEN LANE  
City-St-Zip: COVINGTON, LA 70433 US

Title: MMBR  
Name: STOCKSTILL, SHARMAN  
Address: 424 ASPEN LANE  
City-St-Zip: COVINGTON, LA 70433 US

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: LARRY TAPE

MGRM

04/08/2011

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