

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000013851

Entity Name: GINNYS CONDOS, LLC

**FILED**  
**Oct 04, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

318 SHERMAN AVE.  
PANAMA CITY, FL 32401 US

**New Principal Place of Business:**

**Current Mailing Address:**

318 SHERMAN AVE.  
PANAMA CITY, FL 32401 US

**New Mailing Address:**

FEI Number: 26-4243856

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHIVER, GINNY  
318 SHERMAN AVE.  
PANAMA CITY, FL 32401 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: GINNY SHIVER

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SHIVER, C. CODY  
Address: 318 SHERMAN AVE.  
City-St-Zip: PANAMA CITY, FL 32401 US

Title: MGRM  
Name: SHIVER, GINNY  
Address: 318 SHERMAN AVE.  
City-St-Zip: PANAMA CITY, FL 32401 US

Title: MGRM  
Name: SHIVER, WAYNE  
Address: 318 SHERMAN AVE.  
City-St-Zip: PANAMA CITY, FL 32401 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: GINNY SHIVER

PRES

10/04/2010

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