

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000043324

Entity Name: OCALA SWAMP, LLC

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1900 S.E. 18TH AVENUE  
OCALA, FL 34471 US

**New Principal Place of Business:**

2640 NE 25TH STREET  
OCALA, FL 34470 US

**Current Mailing Address:**

1900 S.E. 18TH AVENUE  
OCALA, FL 34471 US

**New Mailing Address:**

2640 NE 25TH STREET  
OCALA, FL 34470 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

CRIPPEN, JEFFERY P  
1900 S.E. 18TH AVENUE  
OCALA, FL 34471 US

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

WISNIEWSKI, JASON W MR  
2640 NE 25TH STREET  
OCALA, FL 34470 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: JASON W WISNIEWSKI

04/21/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: WISNIEWSKI, JASON W  
Address: 2640 NE 25TH STREET  
City-St-Zip: OCALA, FL 34470 US

Title: MGR  
Name: WISNIEWSKI, JASON  
Address: 2640 N.E. 25TH STREET  
City-St-Zip: OCALA, FL 34470 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: JASON W WISNIEWSKI

MGR

04/21/2011

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