

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000054209

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** WORLD BAREFOOT CENTER, LLC

**Current Principal Place of Business:**

3915 CONINE DRIVE EAST  
WINTER HAVEN, FL 33881

**New Principal Place of Business:**

**Current Mailing Address:**

3915 CONINE DRIVE EAST  
WINTER HAVEN, FL 33881

**New Mailing Address:**

**FEI Number:** 27-0497256

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

ST. ONGE, KEITH  
3915 CONINE DRIVE EAST  
WINTER HAVEN, FL 33881 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:** ST. ONGE, KEITH  
**Address:** 3915 CONINE DRIVE EAST  
**City-St-Zip:** WINTER HAVEN, FL 33881

**Title:** MGRM  
**Name:** SMALL, DAVID  
**Address:** 4127 ISLAND LAKES DRIVE  
**City-St-Zip:** WINTER HAVEN, FL 33881

**Title:** MGRM  
**Name:** BOUCHARD, GARY  
**Address:** 3915 LAKE CONINE DRIVE EAST  
**City-St-Zip:** WINTER HAVEN, FL 33881

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:** KEITH ST. ONGE

MGRM

01/04/2012

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