

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000062336

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** NORTH FLORIDA PLAYSETS LLC

**Current Principal Place of Business:**

1775 HARTSFIELD ROAD  
MONTICELLO, FL 32344 US

**New Principal Place of Business:**

**Current Mailing Address:**

3333 7TH STREET S.E.  
MOULTRIE, GA 31768 US

**New Mailing Address:**

3333 FREEDOM LANE S.E.  
MOULTRIE, GA 31768 US

**FEI Number:** 27-0450736

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TAYLOR, STEADMAN K  
1525 W. LIVE OAK ROAD  
MONTICELLO, FL 32344 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:** MGR  
**Name:** TAYLOR, STEADMAN K  
**Address:** 1525 W. LIVE OAK ROAD  
**City-St-Zip:** MONTICELLO, FL 32344 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:** STEADMAN K. TAYLOR

OWNE

01/05/2011

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