

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000073734

Entity Name: GARY RAWLINS, LLC

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5102-5 TIMUQUANA ROAD  
JACKSONVILLE, FL 32210 US

**New Principal Place of Business:**

**Current Mailing Address:**

1848 HICKORY TRACE DRIVE  
FLEMING ISLAND, FL 32003 US

**New Mailing Address:**

FEI Number: 27-1158377

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MEUX, JOSEPH C JR  
501 RIVERSIDE AVE  
SUITE 903  
JACKSONVILLE, FL 32202 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: RAWLINS, GARY L  
Address: 1848 HICKORY TRACE DRIVE  
City-St-Zip: FLEMING ISLAND, FL 32003 US

Title: MGRM  
Name: RAWLINS, JULIE W  
Address: 1848 HICKORY TRACE DRIVE  
City-St-Zip: FLEMING ISLAND, FL 32003 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: JULIE RAWLINS

MGRM

01/13/2010

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