

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000078771

**FILED**  
**Jan 08, 2012**  
**Secretary of State**

**Entity Name:** TWO TWELVE ENTERPRISES #2 LLC

**Current Principal Place of Business:**

2000 CRAWFORDVILLE HWY.  
SUITE D  
CRAWFORDVILLE, FL 32327 US

**New Principal Place of Business:**

**Current Mailing Address:**

11 MAGNOLIA RIDGE  
CRAWFORDVILLE, FL 32327 US

**New Mailing Address:**

**FEI Number:** 27-0800938

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DOYLE, THOMAS P  
11 MAGNOLIA RIDGE  
CRAWFORDVILLE, FL 32327 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:** DOYLE, CRAIG D  
**Address:** 2500 MERCHANTS ROW APT 123  
**City-St-Zip:** TALLAHASSEE, FL 32311 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:** THOMAS P. DOYLE

SEC/

01/08/2012

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