

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000083369

Entity Name: CANOPY RED, LLC

**FILED**  
**Apr 14, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

8012 OAK GROVE PLANTATION ROAD  
TALLAHASSEE, FL 32312 US

**New Principal Place of Business:**

**Current Mailing Address:**

8012 OAK GROVE PLANTATION ROAD  
TALLAHASSEE, FL 32312 US

**New Mailing Address:**

FEI Number: 26-3644356

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHMIDT, JON A  
8012 OAK GROVE PLANTATION ROAD  
TALLAHASSEE, FL 32303 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: MGMR  
Name: SCHMIDT, JOSHUA E  
Address: 8012 OAK GROVE PLANTATION ROAD  
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: MGMR  
Name: KRAZIT, FORREST  
Address: 383 THORNBERG DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: MGMR  
Name: HARVELL, RYAN J  
Address: 1994 BUSHY HALL ROAD  
City-St-Zip: TALLAHASSEE, FL 32309 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: JON A. SCHMIDT

RA

04/14/2012

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