

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000095554

Entity Name: TOMOKANE WHITE LLC

**FILED**  
**Apr 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

17 ROTA ST.  
SANTA RITA, GU 96915 US

**New Principal Place of Business:**

17 ROTA ST  
SANTA RITA, GU 96915 US

**Current Mailing Address:**

17 ROTA ST.  
SANTA RITA, GU 96915 US

**New Mailing Address:**

6561 EAGLE CREST DR  
MILTON, FL 32570 US

FEI Number: 27-1184257

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NORTHWEST REGISTERED AGENT, LLC.  
3111 W. DR. MLK BLVD.  
STE 100-B180  
TAMPA, FL 33607 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: WHITE, TIMOTHY R  
Address: 17 ROTA ST  
City-St-Zip: SANTA RITA, GU 96915 US

Title: MGRM  
Name: WHITE, FRANICIA T  
Address: 17 ROTA ST  
City-St-Zip: SANTA RITA, GU 96915 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: TIMOTHY ROBERT WHITE

MGRM

04/06/2012

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