

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000000009

FILED  
Apr 29, 2011  
Secretary of State

Entity Name: PARK & POST, LLC

**Current Principal Place of Business:**

4000 B ST. JOHNS AVE.  
SUITE 22  
JACKSONVILLE, FL 32205

**New Principal Place of Business:**

**Current Mailing Address:**

4000 B ST. JOHNS AVE.  
SUITE 22  
JACKSONVILLE, FL 32205

**New Mailing Address:**

FEI Number: 27-3283543

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WALTON, ALONZO D  
4000 B ST. JOHNS AVE.  
SUITE 22  
JACKSONVILLE, FL 32205 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: WALKER, CAROLYN  
Address: 663 RIGGINS RD  
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGR  
Name: JORDAN, JANE  
Address: 5829 HECKSHER DR  
City-St-Zip: JACKSONVILLE, FL 32226

Title: MGR  
Name: ELIZABETH WALTON TRUST  
Address: 4000B ST JOHNS AVE, STE 22  
City-St-Zip: JACKSONVILLE, FL 32205

Title: MGR  
Name: VADEN ENTERPRISES  
Address: 9393 ABERCORN ST  
City-St-Zip: SAVANNAH, GA 31406

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: ALONZO WALTON

D

04/29/2011

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