

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000016388

Entity Name: KODHAUS LLC

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

128 NE 4 ST  
GAINESVILLE, FL 32601 US

**New Principal Place of Business:**

**Current Mailing Address:**

620 NW 27 WAY  
GAINESVILLE, FL 32607 US

**New Mailing Address:**

FEI Number: 45-1613284

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WILSON, JIM B  
620 NW 27 WAY  
GAINESVILLE, FL 32607 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: WILSON, MEEGAN J  
Address: 620 NW 27 WAY  
City-St-Zip: GAINESVILLE, FL 32607 US

Title: MGRM  
Name: WILSON, MARLY J  
Address: 128 NE 4 ST  
City-St-Zip: GAINESVILLE, FL 32601 US

Title: MGRM  
Name: WILSON, JIM B  
Address: 620 NW 27 WAY  
City-St-Zip: GAINESVILLE, FL 32607 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: JIM B WILSON

MGRM

01/04/2012

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