

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000033739

Entity Name: L. B. LOFTIS & CO., LLC

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

**Current Principal Place of Business:**

301 E. PINE STREET  
SUITE 150  
ORLANDO, FL 32801 US

**New Principal Place of Business:**

**Current Mailing Address:**

301 E. PINE STREET  
SUITE 150  
ORLANDO, FL 32801 US

**New Mailing Address:**

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LOFTIS, LARRY B ESQ.  
301 E. PINE STREET  
SUITE 150  
ORLANDO, FL 32801 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: LOFTIS, LARRY B  
Address: 301 E. PINE STREET, SUITE 150  
City-St-Zip: ORLANDO, FL 32801 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: LARRY LOFTIS

MGRM

01/06/2012

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