

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000038457

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** BRUCE SKELTON ENTERPRISES LLC

**Current Principal Place of Business:**

66 PURIFY RIDGE ROAD  
CRAWFORDVILLE, FL 32327

**New Principal Place of Business:**

**Current Mailing Address:**

66 PURIFY RIDGE ROAD  
CRAWFORDVILLE, FL 32327

**New Mailing Address:**

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

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

SKELTON, BRUCE  
66 PURIFY RIDGE ROAD  
CRAWFORDVILLE, FL 32327    US

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

SKELTON, BRUCE  
845 E. CALL ST.  
TALLAHASSEE, FL 32301    US

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: BRUCE SKELTON

04/30/2011

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title:                      MGRM  
Name:                     SKELTON, BRUCE  
Address:                 845 E. CALL ST.  
City-St-Zip:            TALLAHASSEE, FL 32301

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: BRUCE SKELTON

MGRM

04/30/2011

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