

**2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000050851

**FILED  
Mar 29, 2012  
Secretary of State**

**Entity Name:** 319 LJCA, LLC

**Current Principal Place of Business:**

100 NICHOLS WAY  
SEBRING, FL 33875 US

**New Principal Place of Business:**

**Current Mailing Address:**

100 NICHOLS WAY  
SEBRING, FL 33875 US

**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:**

PAMELA T. KARLSON, PA  
301 DAL HALL BOULEVARD  
LAKE PLACID, FL 33852 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: WILLIAM J. NICHOLS TRUST DTD JUNE 12, 2008  
Address: 100 NICHOLS WAY  
City-St-Zip: SEBRING, FL 33875 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: WILLIAM NICHOLS

MGRM

03/29/2012

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