

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000051071

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** AGRICULTURAL CENTER DRIVE LLC

**Current Principal Place of Business:**

630 WEST ADAMS STREET  
JACKSONVILLE, FL 32204

**New Principal Place of Business:**

3400 AGRICULTURAL CENTER DRIVE  
ST. AUGUSTINE, FL 32092

**Current Mailing Address:**

630 WEST ADAMS STREET  
JACKSONVILLE, FL 32204

**New Mailing Address:**

3400 AGRICULTURAL CENTER DRIVE  
ST. AUGUSTINE, FL 32092

**FEI Number:** 45-1605243

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KRALL, JOSEPH P  
630 W ADAMS STREET  
JACKSONVILLE, FL 32204 US

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

AVERY, RONALD R MGR  
3400 AGRICULTURAL CENTER DRIVE  
ST. AUGUSTINE, FL 32092 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: RONALD R AVERY

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: AVERY, RONALD R  
Address: 3400 AGRICULTURAL CENTER DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32092 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: RONALD R AVERY

MGR

04/30/2012

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