

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000060640

Entity Name: PLK STABLES, LLC

**FILED**  
**Apr 03, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

344 S. WOODLAND BLVD  
DELAND, FL 32720 US

**New Principal Place of Business:**

6939 REESE RIVER BLVD.  
ELKO, NV 89801 US

**Current Mailing Address:**

344 S. WOODLAND BLVD  
DELAND, FL 32720

**New Mailing Address:**

438 ELBURZ UNIT 1  
ELKO, NV 89801 US

FEI Number: 27-2793275

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GOODFELLOW & COMPANY, CPA, INC.  
344 S. WOODLAND BLVD  
DELAND, FL 32720 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: HAWN, LYNDSEY  
Address: 438 ELBURZ UNIT 1  
City-St-Zip: ELKO, NV 89801 US

Title: MGRM  
Name: HENDERSON, TIM  
Address: 438 ELBURZ UNIT 1  
City-St-Zip: ELKO, NV 89801 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: LYNDSEY R. HAWN

MGRM

04/03/2012

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