

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000095909

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Entity Name:** CENTRAL FLORIDA GAME BIRD, LLC

**Current Principal Place of Business:**

26801 BAYHEAD RD.  
DADE CITY, FL 33523

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6  
SAN ANTONIO, FL 33576

**New Mailing Address:**

**FEI Number:** 27-3454796

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAN B. DILLARD, CPA  
15995 BELLAMY BROS. BLVD.  
DADE CITY, FL 33576 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: BARTHLE, BENJAMIN  
Address: 36826 CENTRAL AVE.  
City-St-Zip: DADE CITY, FL 33525

Title: MGRM  
Name: BARTHLE, CHRISTOPHER  
Address: 13348 BELLAMY BROS. BLVD.  
City-St-Zip: DADE CITY, FL 33525

Title: MGRM  
Name: DILLARD, BRIAN  
Address: 5487 VALLEY VIEW DR.  
City-St-Zip: BROOKSVILLE, FL 346017601

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: BANJAMIN BARTHLE

MGRM

01/06/2011

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