

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000106847

FILED  
Apr 29, 2011  
Secretary of State

Entity Name: TWIN LAKES MANAGEMENT, L.L.C.

## Current Principal Place of Business:

1890 LPGA BOULEVARD  
SUITE 200  
DAYTONA BEACH, FL 32117

## New Principal Place of Business:

## Current Mailing Address:

1890 LPGA BOULEVARD  
SUITE 200  
DAYTONA BEACH, FL 32117

## New Mailing Address:

FEI Number: 27-3684241

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

PANKRATZ, VONNA M  
1890 LPGA BOULEVARD  
260  
DAYTONA BEACH, FL 32117 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: VONNA M. PANKRATZ

04/29/2011

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR  
Name: RUST, JAMES W  
Address: 1890 LPGA BOULEVARD, SUITE 200  
City-St-Zip: DAYTONA BEACH, FL 32217

Title: MGR  
Name: BIANCHI, JOSEPH MD  
Address: 1890 LPGA BOULEVARD, SUITE 250  
City-St-Zip: DAYTONA BEACH, FL 32217

Title: MGR  
Name: GILLESPIE, ALBERT MD  
Address: 1890 LPGA BOULEVARD, SUITE 240  
City-St-Zip: DAYTONA BEACH, FL 32217

Title: MGR  
Name: RAMSHAW, DAVID MD  
Address: 1890 LPGA BOULEVARD, SUITE 250  
City-St-Zip: DAYTONA BEACH, FL 32117

Title: MGR  
Name: TRAFICANTE, DALE MD  
Address: 1890 LPGA BOULEVARD, SUITE 220  
City-St-Zip: DAYTONA BEACH, FL 32117

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: JAMES W. RUST MD

MGR

04/29/2011

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