

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000127179

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** NATURE COAST PROPERTY & DEVELOPMENT, LLC

**Current Principal Place of Business:**

17 LULU STREET  
BROOKSVILLE, FL 34601

**New Principal Place of Business:**

31 SOUTH MAIN STREET  
BROOKSVILLE, FL 34601

**Current Mailing Address:**

POST OFFICE BOX 1236  
BROOKSVILLE, FL 34605

**New Mailing Address:**

31 SOUTH MAIN STREET  
BROOKSVILLE, FL 34601

**FEI Number:** 27-4245683

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOWMAN LAW FIRM, P.A.  
17 LULU STREET  
BROOKSVILLE, FL 34601 US

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

LOWMAN LAW FIRM, P.A.  
31 SOUTH MAIN STREET  
BROOKSVILLE, FL 34601 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: STEPHANIE LOWMAN

04/10/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ROBINSON, TROY  
Address: 5568 BOWLINE BEND  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: MGRM  
Name: LOWMAN, JOSEPH  
Address: 17 LULU STREET  
City-St-Zip: BROOKSVILLE, FL 34601

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: JOSEPH LOWMAN

MGRM

04/10/2012

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