

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000014903

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

**Entity Name:** LAW FIRM OF LARRY GIBBS TURNER, P.L.

**Current Principal Place of Business:**

204 WEST UNIVERSITY AVENUE, SUITE 7  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

204 WEST UNIVERSITY AVENUE, SUITE 7  
GAINESVILLE, FL 32601

**New Mailing Address:**

**FEI Number:** 27-4668020

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TURNER, LARRY GIBBS  
204 WEST UNIVERSITY AVENUE, SUITE 7  
GAINESVILLE, FL 32601 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:** TURNER, LARRY GIBBS  
**Address:** 204 WEST UNIVERSITY AVENUE, SUITE 7  
**City-St-Zip:** GAINESVILLE, FL 32601

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: LARRY GIBBS TURNER

MGRM

01/30/2012

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