

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000029441

**FILED
Apr 28, 2012
Secretary of State**

Entity Name: CAMPUS POINT OF GAINESVILLE, LLC

Current Principal Place of Business:

13235 SW 6TH AVE
NEWBERRY, FL 32669 US

New Principal Place of Business:

Current Mailing Address:

13235 SW 6TH AVE
NEWBERRY, FL 32669 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PORTER, SIMONE
7713 CRAIGHURST LOOP
NEW PORT RICHEY, FL 34655 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: PORTER, SIMONE
Address: 7713 CRAIGHURST LOOP
City-St-Zip: NEW PORT RICHIE, FL 34655 US

Title: MGRM
Name: HEISE, JON
Address: 13235 SW 6TH AVE
City-St-Zip: NEWBERRY, FL 32669 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: SIMONE PORTER

MNGR

04/28/2012

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