

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000039929

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

**Entity Name:** FLORIDA WHOLESale HOMES, LLC

**Current Principal Place of Business:**

34 ALHAMBRA ST  
PONTE VEDRA, FL 32082 US

**New Principal Place of Business:**

**Current Mailing Address:**

34 ALHAMBRA ST  
PONTE VEDRA, FL 32082 US

**New Mailing Address:**

PO BOX 440241  
JACKSONVILLE, FL 32222 US

**FEI Number:** 45-1453449

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JONES, CLAYBORN E  
3030 PIEDMONT MANOR DR  
ORANGE PARK, FL 32065 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: JONES, CLAYBORN E  
Address: 3030 PIEDMONT MANOR DR  
City-St-Zip: ORANGE PARK, FL 32065 US

Title: MGRM  
Name: ZILKOWSKI, DAVID  
Address: 34 ALHAMBRA ST  
City-St-Zip: PONTE VEDRA, FL 32082 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: CLAYBORN E. JONES

MGRM

04/30/2012

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