

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L11000080727

Entity Name: USA SFA, LLC

**FILED**  
**May 15, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1 UNIVERSITY BLVD  
ST AUGUSTINE, FL 32086 US

**New Principal Place of Business:**

**Current Mailing Address:**

1 UNIVERSITY BLVD  
ST AUGUSTINE, FL 32086 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:**

PARIS, STANLEY V DR  
1 UNIVERSITY BLVD  
ST AUGUSTINE, FL 32086 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: MGR  
Name: PARIS, STANLEY V DR  
Address: 1 UNIVERSITY BLVD  
City-St-Zip: ST AUGUSTINE, FL 32086 US

Title: P  
Name: NITSCH, WANDA B  
Address: 700 WINDY POINT DRIVE  
City-St-Zip: SAN MARCOS, CA 92069 US

Title: EVP  
Name: JAMES, RHONDA J  
Address: 1 UNIVERSITY BLVD  
City-St-Zip: ST AUGUSTINE, FL 32086 US

Title: EVP  
Name: AGATHA, RACHELLE  
Address: 700 WINDY POINT DRIVE  
City-St-Zip: SAN MARCOS, CA 92069 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: WANDA NITSCH

P

05/15/2012

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