

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000088197

**FILED**  
**Jan 18, 2012**  
**Secretary of State**

**Entity Name:** THREE SQUARES PROPERTIES, LLC

**Current Principal Place of Business:**

207 MORRISON AVE.  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

207 MORRISON AVE.  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

**FEI Number:** 45-3143961

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

COTHRAN, ANNA G  
60 CLAYTON LANE  
SANTA ROSA BEACH, FL 32459 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: LANSING, TERRY  
Address: 207 MORRISON AVE.  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM  
Name: LANSING, LINDA M  
Address: 207 MORRISON AVE.  
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: MGRM  
Name: LANSING, MATTHEW J  
Address: 148 CLIPPER COVE  
City-St-Zip: FREEPORT, FL 32459

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: TERRY LANSING

MGRM

01/18/2012

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