

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000091457

**FILED**  
**Apr 05, 2012**  
**Secretary of State**

**Entity Name:** ALLIGOOD INVESTMENTS, LLC

**Current Principal Place of Business:**

1835 EASTWEST PARKWAY, STE. 8  
FLEMING ISLAND, FL 32003

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2890  
ORANGE PARK, FL 32067

**New Mailing Address:**

**FEI Number:** 45-2874768

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALLIGOOD, KEITH R  
1835 EASTWEST PARKWAY, STE. 8  
FLEMING ISLAND, FL 32003 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: ALLIGOOD, KEITH R  
Address: 1835 EASTWEST PARKWAY, STE. 8  
City-St-Zip: FLEMING ISLAND, FL 32003

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: KEITH ALLIGOOD

MGRM

04/05/2012

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