

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000102955

Entity Name: WILBURS FUN ZONE LLC

**FILED**  
**Apr 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

18010 OKEENE DRIVE  
HUDSON, FL 34667

**New Principal Place of Business:**

**Current Mailing Address:**

18010 OKEENE DRIVE  
HUDSON, FL 34667

**New Mailing Address:**

FEI Number: 45-3243877

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

TABBERT, LISA L  
18010 OKEENE DRIVE  
HUDSON, FL 34667 US

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: LISA TABBERT

04/20/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: LOFT, LEE  
Address: 18010 OKEENE DRIVE  
City-St-Zip: HUDSON, FL 34667

Title: MGR  
Name: TABBERT, LISA  
Address: 18010 OKEENE DRIVE  
City-St-Zip: HUDSON, FL 34667

Title: S  
Name: LOFT, LEE  
Address: 18010 OKEENE DRIVE  
City-St-Zip: HUDSON, FL 34667

Title: T  
Name: TABBERT, LISA  
Address: 18010 OKEENE DRIVE  
City-St-Zip: HUDSON, FL 34667

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: LISA TABBERT

MGR

04/20/2012

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