

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L94000000430

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

**Entity Name:** DURTY NELLY'S IRISH PUB, L.C.

**Current Principal Place of Business:**

208 W. UNIVERSITY AVE.  
GAINESVILLE, FL 32601

**New Principal Place of Business:**

**Current Mailing Address:**

208 W. UNIVERSITY AVE.  
GAINESVILLE, FL 32601

**New Mailing Address:**

**FEI Number:** 59-3257292

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KRUEGER, SCOTT D  
234 SOUTH MAIN STREET  
GAINESVILLE, FL 32601 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:** DIXON, GABRIEL  
**Address:** P.O. BOX 772468  
**City-St-Zip:** OCALA, FL 344772468

**Title:** MGR  
**Name:** DIXON, SHAUNA  
**Address:** 6533 NW 37TH DRIVE  
**City-St-Zip:** GAINESVILLE, FL 32653

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:** SHAUNA DIXON

MNGR

04/05/2012

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