

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005366

Entity Name: TOWNSEND TND, LLC

FILED
Jan 19, 2012
Secretary of State

Current Principal Place of Business:

16 SCONTICUT NECK ROAD., #211
FAIRHAVEN, MA 02719 US

New Principal Place of Business:

5346 SW 91ST TERRACE
GAINESVILLE, FL 326084399 US

Current Mailing Address:

16 SCONTICUT NECK ROAD., #211
FAIRHAVEN, MA 02719 US

New Mailing Address:

5346 SW 91ST TERRACE
GAINESVILLE, FL 326084399 US

FEI Number: 59-3596508

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRAMER, ROBERT B
48 CENTER STREET
FAIRHAVEN, FL 02719 US

Name and Address of New Registered Agent:

COFFEY, C. DAVID
5346 SW 91ST TERRACE
GAINESVILLE, FL 326084399 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: C. DAVID COFFEY

01/19/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: KRAMER, DAVID M
Address: 5346 SW 91ST TERRACE
City-St-Zip: GAINESVILLE, FL 326084399 US

Title: MGR
Name: COFFEY, C. DAVID
Address: 5346 SW 91ST TERRACE
City-St-Zip: GAINESVILLE, FL 326084399 US

Title: MGRM
Name: FLEEMAN, JEFFREY
Address: 5346 SW 91ST TERRACE
City-St-Zip: GAINESVILLE, FL 326084399 US

Title: MGRM
Name: HAILE PLANTATION CORPORATION
Address: 5346 SW 91ST TERRACE
City-St-Zip: GAINESVILLE, FL 326084399 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: C. DAVID COFFEY

MGR

01/19/2012

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