

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M00000001486

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

**Entity Name:** COOKE COMMUNICATIONS FLORIDA, LLC

**Current Principal Place of Business:**

3420 NORTHSIDE DRIVE  
KEY WEST, FL 33040 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1800  
KEY WEST, FL 33041 US

**New Mailing Address:**

**FEI Number:** 52-2251093

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLARIN, PAUL A  
3420 NORTHSIDE DRIVE  
KEY WEST, FL 33040 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:** COOKE, JOHN KENT SR  
**Address:** P.O. BOX 1887  
**City-St-Zip:** MIDDLEBURG, VA 20118 US

**Title:** MGR  
**Name:** COOKE, JOHN K JR  
**Address:** PO BOX 1967  
**City-St-Zip:** GREENVILLE, NC 27834 US

**Title:** MGR  
**Name:** COOKE, THOMAS K  
**Address:** PO BOX 1800  
**City-St-Zip:** KEY WEST, FL 33041 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:** THOMAS K COOKE

MGR

03/20/2012

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