

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M01000002018

Entity Name: ARBORIS, LLC

**FILED**  
**Jan 26, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1101 WEST LATHROP AVENUE  
GATE 16  
SAVANNAH, GA 31415

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 2008  
SAVANNAH, GA 31402

**New Mailing Address:**

FEI Number: 59-3730188

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DIXON HUGHES  
C/O JOHN RANES  
6622 SOUTHPOINT DRIVE SOUTH SUITE 495  
JACKSONVILLE, FL 32216 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: HARTING, STEPHEN A MEMBER  
Address: EL QUISCO 3140, LAS CONDES  
City-St-Zip: SANTIAGO, NA CHILE CH

Title: MGRM  
Name: HARTING, THOMAS PRESIDE  
Address: EL QUISCO, LAS CONDES  
City-St-Zip: SANTIAGO, NA CHILE CH

Title: MGR  
Name: CANALES, MANUEL J GEN MGR  
Address: 1101 WEST LATHROP AVENUE, GATE 16  
City-St-Zip: SAVANNAH, GA 31415 US

Title: MGR  
Name: ANDERSON, JEANNE CFO  
Address: 1101 WEST LATHROP AVENUE, GATE 16  
City-St-Zip: SAVANNAH, GA 31415 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: JEANNE D. ANDERSON

CFO

01/26/2011

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