

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000001849

Entity Name: FOX TRACE, LLC

**FILED**  
**Jan 21, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

464 BROCKFORD ROAD  
HEFLIN, AL 36264

**New Principal Place of Business:**

**Current Mailing Address:**

464 BROCKFORD ROAD  
HEFLIN, AL 36264

**New Mailing Address:**

FEI Number: 20-3757105

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMITH, DOUGLAS L  
221 MCKENZIE AVE  
PANAMA CITY, FL 32401 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: LOCKLEAR, D.E.  
Address: P.O. BOX 451  
City-St-Zip: HEFLIN, AL 36264

Title: MGRM  
Name: LOCKLEAR, JUDY B  
Address: P.O. BOX 451  
City-St-Zip: HEFLIN, AL 36264

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: D.E. LOCKLEAR

PRES

01/21/2010

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