

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000035393

**Entity Name:** DKLZ, LLC

**Current Principal Place of Business:**

4743 N US HWY 441  
LAKE CITY, FL 32055

**Current Mailing Address:**

4743 N US HWY 441  
LAKE CITY, FL 32055 US

**FEI Number:** 41-2137423

**Certificate of Status Desired:** No

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

ZUCCOLA, LORI  
LAKE CITY CAMPGROUND  
4743 N. US HIGHWAY 441  
LAKE CITY, FL 32055 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name ZUCCOLA, LORI A  
Address 4743 NORTH US HWY 441  
City-State-Zip: LAKE CITY FL 32055

Title MGRM  
Name ZUCCOLA, KIMBERLY A  
Address 4743 NORTH US HWY 441  
City-State-Zip: LAKE CITY FL 32055

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LORI ZUCCOLA

**OWNER**

**01/24/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date