

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000132116

Entity Name: COVERED BRIDGE PARTNERS, LLC

Current Principal Place of Business:

3020 SOUTH FLORIDA AVE., SUITE 101
LAKELAND, FL 33803

Current Mailing Address:

3020 SOUTH FLORIDA AVE., SUITE 101
LAKELAND, FL 33803

FEI Number: 46-1211667

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADAMS, D. JOEL
3020 SOUTH FLORIDA AVE., SUITE 101
LAKELAND, FL 33803 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	MGR	Title	MGR
Name	ADAMS, ROBERT J	Name	ADAMS, D. JOEL
Address	3020 SOUTH FLORIDA AVE., SUITE 101	Address	3020 SOUTH FLORIDA AVE., SUITE 101
City-State-Zip:	LAKELAND FL 33803	City-State-Zip:	LAKELAND FL 33803

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: D. JOEL ADAMS

MANAGER

04/24/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date