

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000100456

**Entity Name:** RALPH M HIGGINBOTHAM & SONS, LLC

**Current Principal Place of Business:**

4005 CENTER ST  
MIMS, FL 32796

**Current Mailing Address:**

P O BOX 114  
MIMS, FL 32754 US

**FEI Number:** 46-3777123

**Certificate of Status Desired:** Yes

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

HIGGINBOTHAM, RALPH M  
4005 CENTER ST  
MIMS, FL 32796 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 RALPH M & CARRA E  
HIGGINBOTHAM, TRUSTEES  
Address 4005 CENTER ST  
City-State-Zip: MIMS FL 32796

Title MGRM  
Name HIGGINBOTHAM, J. PHILLIP  
Address 4005 CENTER ST  
City-State-Zip: MIMS FL 32796

Title MGRM  
Name HIGGINBOTHAM, RALPH W  
Address 4005 CENTER ST  
City-State-Zip: MIMS FL 32796

Title MGRM  
Name TURNER, REBECCA A  
Address 4005 CENTER ST  
City-State-Zip: MIMS FL 32796

*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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RBECCA A TURNER

**OFFICE MANAGER**

**04/24/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date