

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000006652

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Entity Name:** BITTERMEN, LLC

**Current Principal Place of Business:**

13500 SUTTON PARK DRIVE SOUTH  
SUITE 204  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

1392 MOSS CREEK DRIVE  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

13500 SUTTON PARK DRIVE SOUTH  
SUITE 204  
JACKSONVILLE, FL 32224

**New Mailing Address:**

P O BOX 330499  
ATLANTIC BEACH, FL 32233

**FEI Number:** 59-3651388

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

C. GUY BOND  
11512 LAKE MEAD AVENUE  
303  
JACKSONVILLE, FL 32256 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: STOUDEMIRE, CARL E III  
Address: 189 SAN JUAN DRIVE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGRM  
Name: PITCAIRN, JAMES R III  
Address: 1392 MOSS CREEK DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225

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: JULIE PITCAIRN

MGR

02/17/2010

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