

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000011782

**FILED**  
**Mar 29, 2010**  
**Secretary of State**

**Entity Name:** BRACEWELL ENTERPRISES, L.L.C.

**Current Principal Place of Business:**

502 NORTH LEMON ST.  
BUNNELL, FL 32110

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1484  
BUNNELL, FL 32110

**New Mailing Address:**

**FEI Number:** 20-0319887

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRACEWELL, RHONDA D  
502 NORTH LEMON ST.  
BUNNELL, FL 32110 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:** MGR  
**Name:** BRACEWELL, RHONDA D  
**Address:** 502 NORTH LEMON ST.  
**City-St-Zip:** BUNNELL, FL 32110

**Title:** MGR  
**Name:** DILLS, DOROTHY F  
**Address:** 1100 E MAGNOLIA AVE  
**City-St-Zip:** BUNNELL, FL 32110

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:** DOROTHY F DILLS

MGR

03/29/2010

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