

**LIMITED LIABILITY COMPANY  
ANNUAL REPORT (AR)**

**FILED**  
**Jan 09, 2006 8:00 am**  
**Secretary of State**

01-09-2006 90051 042 \*\*\*\*50.00

**DOCUMENT #** L03000047909

1. Entity Name

RANDY HERNDON CONSTRUCTION LLC



**DO NOT WRITE IN THIS SPACE**

20000159

2. Principal Place of Business

4211 ROCKINGHAM ROAD

Suite, Apt. #, etc.

3. Mailing Address

4211 ROCKINGHAM ROAD

Suite, Apt. #, etc.

CR2E083B (8/05)

City & State  
TALLAHASSEE, FL 32303

City & State  
TALLAHASSEE, FL 32303

4. FEI Number  
59-3026216

Applied For  
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name HERNDON, RANDY

Street Address (P.O. Box Number is Not Acceptable)  
4211 ROCKINGHAM ROAD

City TALLAHASSEE FL Zip Code 32303

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FEE IS \$50.00**

**Make Check Payable to Florida Department of State  
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HERNDON, RANDY 4211 ROCKINGHAM ROAD TALLAHASSEE, FL 32303	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1-4-06 850-933 4501