

## ANNUAL REPORT

DOCUMENT # L03000054243

1. Entity Name  
WHITE BUFFALO HOLDINGS, LLC

**FILED**  
**Mar 22, 2004 8:00 am**  
**Secretary of State**

03-22-2004 90422 048 \*\*\*\*\*50.00

Principal Place of Business

1236 WEST KALEY  
ORLANDO, FL 32856

Mailing Address

1236 WEST KALEY  
ORLANDO, FL 32856

2. Principal Place of Business

3. Mailing Address

P.O. Box 568868

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Orlando FL

Zip

Country

Zip

Country

32856

USA

02052004

Chg-LLC

CR2E083 (10/03)

4. FEI Number

20-0503489

Applied For

Not Applicable

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

## 6. Name and Address of Current Registered Agent

AAGAARD, CINDY  
1236 WEST KALEY  
ORLANDO, FL 32856

## 7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00  
Due by May 1, 2004Make check payable to  
Florida Department of State

## 9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM	<input type="checkbox"/> Delete
NAME	Robert S. Hughes	
STREET ADDRESS	PO Box 568868	
CITY-ST-ZIP	Orlando FL 32856	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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CITY-ST-ZIP		

## 10. ADDITIONS/CHANGES

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP	

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

Robert S. Hughes Robert S. Hughes

3/17/04