

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000042175

Entity Name: UCA, LLC

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

904 E. MOODY BLVD.  
BUNNELL, FL 32110

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 579  
BUNNELL, FL 32110

**New Mailing Address:**

FEI Number: 51-0510432

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HOSKINS, PATRICIA  
11 POPE LANE  
PALM COAST, FL 32164 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: HOSKINS, PATRICIA  
Address: 11 POPE LANE  
City-St-Zip: PALM COAST, FL 32164

Title: MGRM  
Name: CALA, ORLANDO  
Address: 2220 CALLE LISETA  
City-St-Zip: SAN DIMAS, CA 91773

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: PATRICIA HOSKINS

MNGM

01/11/2010

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