

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 16, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000050405**

1. Entity Name  
**HUEVOS GRANDE, LLC**



Principal Place of Business  
**182 COQUINA KEY DRIVE  
ORMOND BEACH FL 32176**

Mailing Address  
**182 COQUINA KEY DRIVE  
ORMOND BEACH FL 32176**



02102006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**20-1343571**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**BROCK, JEFFREY P  
444 SEABREEZE BLVD., STE. 900  
DAYTONA BEACH, FL 32118**

**DO NOT WRITE  
IN THIS SPACE**

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, 2006**

0000007436141  
02/27/06-80025-011 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	WHITE, MARK W.
STREET ADDRESS	182 COQUINA KEY DR.
CITY- ST- ZIP	ORMOND BEACH, FL 32176

TITLE	
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CITY- ST- ZIP	

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**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** *Mark W. White*

2-13-06 386-295-8326