

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000053924

FILED  
Jul 21, 2008  
Secretary of State

Entity Name: BENJAMINS, LLC

**Current Principal Place of Business:**

3106 W 23RD ST.  
PANAMA CITY, FL 32405 US

**New Principal Place of Business:**

**Current Mailing Address:**

3106 W 23RD ST.  
PANAMA CITY, FL 32405 US

**New Mailing Address:**

FEI Number: 05-0604165      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

HUTT, JOHN B III  
3106 W 23RD ST  
PANAMA CITY, FL 32405 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 ( ) Delete  
Name: CORDON, CHRIST P  
Address: 416 W. 23RD ST  
City-St-Zip: PANAMA CITY, FL 32405 US

Title: MGRM ( ) Delete  
Name: CORDON, DAWN M  
Address: 416 W. 23RD ST.  
City-St-Zip: PANAMA CITY, FL 32405 US

Title: MGRM ( ) Delete  
Name: GINN, JOSEPH W  
Address: 3302 COUNTRY CLUB DR.  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: MGRM ( ) Delete  
Name: GINN, MICHELLE  
Address: 3302 COUNTRY CLUB DR.  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: MGRM ( ) Delete  
Name: HUTT, PENELOPE S  
Address: 1413 COUNTRY CLUB DR.  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: MGRM ( ) Delete  
Name: HUTT, JOHN B III  
Address: 3106 W. 23RD ST.  
City-St-Zip: PANAMA CITY, FL 32405 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JOHN HUTT, III

MGRM

07/21/2008

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