

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000009973

FILED
Mar 08, 2009
Secretary of State

Entity Name: HUCKLEBERRY'S CREATIONS, LLC

Current Principal Place of Business:

210 W WASHINGTON ST
MONTICELLO, FL 32344 US

New Principal Place of Business:

Current Mailing Address:

210 W WASHINGTON ST
MONTICELLO, FL 32344 US

New Mailing Address:

FEI Number: 33-1109295

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SKELTON, DONNA C
385 N JEFFERSON ST
MONTICELLO, FL 32344 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: MGR () Delete
Name: SKELTON, DONNA C
Address: 385 N JEFFERSON ST
City-St-Zip: MONTICELLO, FL 32344 US

Title: MGRM () Delete
Name: SKELTON, MAURICE D
Address: 385 N JEFFERSON ST
City-St-Zip: MONTICELLO, FL 32344 US

Title: MGRM () Delete
Name: SCOLLES, WESLEY D
Address: 4462 WHISPERING OAKS DR F
City-St-Zip: TALLAHASSEE, FL 32309 US

Title: MGRM () Delete
Name: SCOLLES, LISA C
Address: 4462 WHISPERING OAKS DR
City-St-Zip: TALLAHASSEE, FL 32309 US

ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change () Addition
Name: DONNA C SKELTON,
Address: 385 N JEFFERSON ST
City-St-Zip: MONTICELLO, FL 32344 US

Title: MGR (X) Change () Addition
Name: DONNA C SKELTON,
Address: 385 N JEFFERSON
City-St-Zip: MONTICELLO, FL 32344 US

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: DONNA C SKELTON

MGR

03/08/2009

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