

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000016515

Entity Name: LUCA SOLUTIONS, LLC

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1313 WEST MIDWAY ROAD  
FORT PIERCE, FL 34982

**New Principal Place of Business:**

6326 NW TOPAZ WAY  
PORT ST LUCIE, FL 34986

**Current Mailing Address:**

1313 WEST MIDWAY ROAD  
FORT PIERCE, FL 34982

**New Mailing Address:**

PO BOX 14979  
FORT PIERCE, FL 34979

FEI Number: 20-2351226

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CANNON, CHRISTOPHER R  
1313 WEST MIDWAY ROAD  
FORT PIERCE, FL 34982 US

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

CANNON, TERESA G  
6326 NW TOPAZ WAY  
PORT ST LUCIE, FL 34986 US

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: TERESA G CANNON

04/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CANNON, TERESA G  
Address: 6326 NW TOPAZ WAY  
City-St-Zip: PORT ST LUCIE, FL 34986

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: TERESA G CANNON

MGRM

04/30/2010

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