

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035609

FILED  
Mar 25, 2011  
Secretary of State

Entity Name: DAVIDSON CTH, LLC

**Current Principal Place of Business:**

1800 GRIFFITH RD.  
LAMONT, FL 32336

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 76  
LAMONT, FL 32336

**New Mailing Address:**

FEI Number: 52-2458272

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAVIDSON, C. LINDEN  
1800 GRIFFITH RD.  
LAMONT, FL 32336 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: DAVIDSON, C LINDEN  
Address: 1800 GRIFFITH RD  
City-St-Zip: LAMONT, FL 32336

Title: MGRM  
Name: DAVIDSON, JOHN L  
Address: 604 ORANGE BLOSSOM DR  
City-St-Zip: WINTER HAVEN, FL 33880

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: JOHN L. DAVIDSON

MGRM

03/25/2011

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