

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000040050

**Entity Name:** HUFFMAN BROTHERS LLC

**FILED**  
**Mar 02, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

15 NW 26TH STREET  
GAINESVILLE, FL 32607

**New Principal Place of Business:**

10135 GATE PARKWAY NORTH  
#508  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

15 NW 26TH STREET  
GAINESVILLE, FL 32607

**New Mailing Address:**

10135 GATE PARKWAY NORTH  
#508  
JACKSONVILLE, FL 32246

**FEI Number:** 20-5933587

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HUFFMAN, WILLIAM F  
10135 GATE PARKWAY NORTH  
APT 508  
JACKSONVILLE, FL 32246 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: HUFFMAN, WILLIAM F  
Address: 10135 GATE PARKWAY NORTH #508  
City-St-Zip: JACKSONVILLE, FL 32246

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: BILL HUFFMAN

MGRM

03/02/2010

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