

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000049190

**Entity Name:** EMPIRICAL GROUP, II, LLC

**FILED**  
**Jan 14, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

363 CATFISH CREEK RD  
LAKE PLACID, FL 33852 US

**New Principal Place of Business:**

**Current Mailing Address:**

363 CATFISH CREEK RD  
LAKE PLACID, FL 33852 US

**New Mailing Address:**

**FEI Number:** 20-2909083

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HONKALA, SCOTT  
363 CATFISH CREEK RD  
LAKE PLACID, FL 33852 US

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

HONKALA, SCOTT R  
363 CATFISH CREEK RD  
LAKE PLACID, FL 33852 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: SCOTT R. HONKALA

01/14/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HONKALA, SCOTT R  
Address: 363 CATFISH CREEK RD  
City-St-Zip: LAKE PLACID, FL 33852 US

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: SCOTT R. HONKALA

MGRM

01/14/2010

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