

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000091975

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: MUSTANG SALLY & THE HAMJOS LLC

**Current Principal Place of Business:**

210 LOCHEN COURT  
WINTER HAVEN, FL 33884

**New Principal Place of Business:**

**Current Mailing Address:**

210 LOCHEN COURT  
WINTER HAVEN, FL 33884

**New Mailing Address:**

FEI Number: 20-3547682

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

JOHNSON, MELODY  
210 LOCHEN COURT  
WINTER HAVEN, FL 33884 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 ( ) Delete  
Name: ANDERSON, SALLY  
Address: 604 30TH ST. NW  
City-St-Zip: WINTER HAVEN, FL 33880

Title: MGRM ( ) Delete  
Name: PRINCE,, RICHARD G  
Address: 106 FOX DEN ST.  
City-St-Zip: AUBURNDALE, FL 33823

Title: MGRM ( ) Delete  
Name: KOCHENBURGER, PATRICIA  
Address: 8210 SIMPSON LANE  
City-St-Zip: LAKE LAND, FL 33809

Title: MGRM ( ) Delete  
Name: JOHNSON, DALE B  
Address: 210 LOCHEN STREET  
City-St-Zip: WINTER HAVEN, FL 33884

Title: MGRM ( ) Delete  
Name: LOMNICK, DONALD L  
Address: 13005 DUCK LAKE CANAL ROAD  
City-St-Zip: DADE CITY, FL 33525

Title: MGRM ( ) Delete  
Name: SMITH, RONALD T  
Address: 208 W. BELVEDERE ST.  
City-St-Zip: LAKE LAND, FL 33803

**ADDITIONS/CHANGES:**

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

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

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

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

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

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

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: DALE JOHNSON

MR.

01/14/2009

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