

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 11, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # L05000108999**

1. Entity Name  
UFFDA HOLDINGS, LLC



Principal Place of Business

220 W. GARDEN STREET  
SUITE 808  
PENSACOLA, FL 32502

Mailing Address

220 W. GARDEN STREET  
SUITE 808  
PENSACOLA, FL 32502



03212007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-3835053

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

WESTERHEIM, THOMAS  
220 W. GARDEN STREET  
SUITE 808  
PENSACOLA, FL 32502

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
WESTERHEIM, THOMAS  
220 W. GARDEN STREET, SUITE 808  
PENSACOLA, FL 32502

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
WESTERHEIM, PAUL  
220 W. GARDEN STREET, SUITE 808  
PENSACOLA, FL 32502

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
BRAGG, JOSEPH M  
220 W. GARDEN STREET, SUITE 808  
PENSACOLA, FL 32502

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U000000699606  
04/19/07-80049-011 50.00

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:** *Paul Westerheim*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #