

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000122501

**FILED**  
**Apr 03, 2012**  
**Secretary of State**

**Entity Name:** POWELL HAMMOCK VENTURE, LLC

**Current Principal Place of Business:**

4052 ECONFINA RIVER RD  
LAMONT, FL 32336

**New Principal Place of Business:**

**Current Mailing Address:**

4052 ECONFINA RIVER RD  
LAMONT, FL 32336

**New Mailing Address:**

**FEI Number:** 26-0132446

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MACKAY, DAVID L  
2801 SOUTHWEST COLLEGE ROAD  
SUITE 9  
OCALA, FL 34474 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:** P  
**Name:** MINCY, CHARLES F  
**Address:** 4052 ECONFINA RIVER RD  
**City-St-Zip:** LAMONT, FL 32336

**Title:** VP  
**Name:** STEFANELLI, ROBERT JR  
**Address:** 4705 ECONFINA RIVER RD  
**City-St-Zip:** LAMONT, FL 32336

**Title:** S  
**Name:** MACKAY, GEORGE  
**Address:** 501 PAWNER TR  
**City-St-Zip:** MAITLAND, FL 32751

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:** CHARLES MINCY

PRES

04/03/2012

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