

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000009773

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: HCC CATTLE & CONSTRUCTION, L.L.C.

**Current Principal Place of Business:**

18085 N. COMMONWEALTH AVENUE  
POLK CITY, FL 33868

**New Principal Place of Business:**

**Current Mailing Address:**

18085 N. COMMONWEALTH AVENUE  
POLK CITY, FL 33868

**New Mailing Address:**

FEI Number: 20-5033333

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

HUFFMAN, HOLLY  
18085 N. COMMONWEALTH AVENUE  
POLK CITY, FL 33868 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: HUFFMAN, HOLLY  
Address: 18085 N. COMMONWEALTH AVENUE  
City-St-Zip: POLK CITY, FL 33868

Title: MGRM ( ) Delete  
Name: POPE, BRUCE  
Address: 2848 FLETCHER AVENUE  
City-St-Zip: LAKELAND, FL 33803

Title: MGRM ( ) Delete  
Name: STEINARD, WAYNE  
Address: 3921 COUNTRY PLACE  
City-St-Zip: WINTER HAVEN, FL 33880

**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:

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: HOLLY HUFFMAN

MGRM

04/30/2008

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