

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000027343

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Entity Name:** HARVEY, COVINGTON & THOMAS OF CENTRAL FLORIDA LLC

**Current Principal Place of Business:**

407 CENTERPOINTE CIR  
SUITE 1603  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

407 CENTER POINTE CIR  
SUITE 1603  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

**FEI Number:** 13-4322921

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HCT  
407 CENTERPOINTE CIRCLE  
SUITE 1603  
ALTAMONTE SPRINGS, FL 32701 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:** MMGR  
**Name:** COVINGTON, SABRINA  
**Address:** 407 CENTER POINTE CIRCLE, #1603  
**City-St-Zip:** ALTAMONTE SPRINGS, FL 32701

**Title:** MGR  
**Name:** HARVEY, RODERICK  
**Address:** 3816 HOLLYWOOD BOULEVARD, SUITE 203  
**City-St-Zip:** HOLLYWOOD, FL 33021

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:** SABRINA D. COVINGTON

MMGR

04/20/2011

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