

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000036720

**FILED**  
**Mar 04, 2010**  
**Secretary of State**

**Entity Name:** ARTADON ENTERPRISES, LLC

**Current Principal Place of Business:**

6385 WYNDOTTE ROAD, LOT A  
PENSACOLA, FL 32526 US

**New Principal Place of Business:**

**Current Mailing Address:**

6385 WYNDOTTE ROAD, LOT A  
PENSACOLA, FL 32526 US

**New Mailing Address:**

**FEI Number:** 20-4713763

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LYNCHARD LAW FIRM, P.A.  
7552 NAVARRE PARKWAY  
SUITE 9  
NAVARRE, FL 32566 US

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

LYNCHARD LAW FIRM, P.A.  
1901 ANDORRA STREET  
NAVARRE, FL 32566 US

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:**

03/04/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** DOOLEY, ARTHUR  
**Address:** 6385 WYNDOTTE ROAD, LOT A  
**City-St-Zip:** PENSACOLA, FL 32526 US

**Title:** MGRM  
**Name:** DOOLEY, DONALD  
**Address:** 8765 BOWMAN AVENUE  
**City-St-Zip:** PENSACOLA, FL 32534 US

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:** DONALD DOOLEY

MGRM

03/04/2010

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