

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000055360

**FILED**  
**Apr 27, 2011**  
**Secretary of State**

**Entity Name:** LABRANCHE HOLDINGS, L.L.C.

**Current Principal Place of Business:**

4501 CROSSTIE RD N.  
JACKSONVILLE, FL 32257

**New Principal Place of Business:**

**Current Mailing Address:**

4501 CROSSTIE RD N.  
JACKSONVILLE, FL 32257

**New Mailing Address:**

**FEI Number:** 56-2586185

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LABRANCHE, JOSEPH L JR  
4501 CROSSTIE RD N.  
JACKSONVILLE, FL 32257 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  
**Name:** LABRANCHE, CAROL  
**Address:** 2917 JENNINGS CT  
**City-St-Zip:** CUMMING, GA 30040

**Title:** MGRM  
**Name:** LABRANCHE, JOSEPH L SR.  
**Address:** 2917 JENNINGS CT  
**City-St-Zip:** CUMMING, GA 30040

**Title:** MGRM  
**Name:** LABRANCHE, JOSEPH L JR  
**Address:** 4501 CROSSTIE RD N.  
**City-St-Zip:** JACKSONVILLE, FL 32257

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:** JOSEPH L. LABRANCHE JR.

V.P

04/27/2011

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