

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000116439

Entity Name: ATOKA VENTURES, LLC

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

**Current Principal Place of Business:**

101 POQUITO ROAD  
SHALIMAR, FL 32579

**New Principal Place of Business:**

**Current Mailing Address:**

101 POQUITO ROAD  
SHALIMAR, FL 32579

**New Mailing Address:**

FEI Number: 36-4598498

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOODPASTER, HOWARD  
101 POQUITO ROAD  
SHALIMAR, FL 32579 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: GOODPASTER, HOWARD  
Address: 101 POQUITO ROAD  
City-St-Zip: SHALIMAR, FL 32579 US

Title: MGR  
Name: GOODPASTER, CHRISTOPHER G  
Address: 25 OLD FERRY ROAD  
City-St-Zip: SHALIMAR, FL 32579 US

Title: MGR  
Name: GOODPASTER, RONALD E  
Address: 200 WHITE STREET #7  
City-St-Zip: NICEVILLE, FL 32578 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: HOWARD T. GOODPASTER

MGRM

02/04/2010

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