

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000119391

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** CHARLIE JOHNSON HOMES, LLC

**Current Principal Place of Business:**

18650 U.S. HWY. 441  
MT. DORA, FL 32757

**New Principal Place of Business:**

**Current Mailing Address:**

18650 U.S. HWY. 441  
MT. DORA, FL 32757

**New Mailing Address:**

**FEI Number:** 20-8189058

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHARLIE JOHNSON BUILDER, INC.  
18650 US HIGHWAY 441  
MT DORA, FL 32757 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:** PRES  
**Name:** LUDECKE, CHERYL  
**Address:** 18650 HIGHWAY 441  
**City-St-Zip:** MOUNT DORA, FL 32757

**Title:** VP  
**Name:** LUDECKE, CARL  
**Address:** 18650 HIGHWAY 441  
**City-St-Zip:** MOUNT DORA, FL 32757

**Title:** VP  
**Name:** LUDECKE, KRISTIN  
**Address:** 18650 HIGHWAY 441  
**City-St-Zip:** MOUNT DORA, FL 32757

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:** CARL R. LUDECKE

MR.

04/19/2011

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