

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000022681

FILED  
Jan 18, 2010  
Secretary of State

Entity Name: 816 FAULL, LLC

**Current Principal Place of Business:**

635 SOMMERS HAMMOCK LANE  
MERRITT ISLAND, FL 32953

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 542307  
MERRITT ISLAND, FL 32954

**New Mailing Address:**

FEI Number: 20-8533098

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KOCH, DAVID  
635 SOMMERS HAMMOCK LANE  
MERRITT ISLAND, FL 32953 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: KOCH, DAVID  
Address: 635 SOMMERS HAMMOCK LANE  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: MGRM  
Name: KOCH, VERNON  
Address: 635 SOMMERS HAMMOCK LANE  
City-St-Zip: MERRITT ISLAND, FL 32953

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: DAVID C KOCH

MGRM

01/18/2010

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