

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000023479

**FILED**  
**Apr 18, 2012**  
**Secretary of State**

**Entity Name:** M.H. PRITCHETT & ASSOCIATES, LLC

**Current Principal Place of Business:**

1050 SE 6TH STREET  
LAKE BUTLER, FL 32054

**New Principal Place of Business:**

**Current Mailing Address:**

1050 SE 6TH STREET  
LAKE BUTLER, FL 32054

**New Mailing Address:**

**FEI Number:** 59-2793540

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PRITCHETT, JON W  
1050 SE 6TH STREET  
LAKE BUTLER, FL 32054 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:** MGR  
**Name:** PRITCHETT, MARVIN H  
**Address:** 1050 SE 6TH STREET  
**City-St-Zip:** LAKE BUTLER, FL 32054

**Title:** MGR  
**Name:** PRITCHETT, MARGARET  
**Address:** 1050 SE 6TH STREET  
**City-St-Zip:** LAKE BUTLER, FL 32054

**Title:** MGR  
**Name:** PRITCHETT, JON W  
**Address:** 1050 SE 6TH STREET  
**City-St-Zip:** LAKE BUTLER, FL 32054

**Title:** MGR  
**Name:** PRITCHETT, PHILLIP W  
**Address:** 1050 SE 6TH STREET  
**City-St-Zip:** LAKE BUTLER, FL 32054

**Title:** MGR  
**Name:** WILSON, ROBIN P  
**Address:** 1050 SE 6TH STREET  
**City-St-Zip:** LAKE BUTLER, FL 32054

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:** JON W. PRITCHETT

MGR

04/18/2012

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