

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000025624

**FILED**  
**Jan 21, 2010**  
**Secretary of State**

**Entity Name:** HAROLD LYNWOOD GRIFFIS, JR. LLC

**Current Principal Place of Business:**

8843 WEST BEN ROWE CIRCLE  
GLEN ST. MARY, FL 32040 US

**New Principal Place of Business:**

8843 WEST BEN ROWE CIRCLE  
MACCLENNY, FL 32063 US

**Current Mailing Address:**

P. O. BOX 342  
GLEN ST. MARY, FL 32040

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

GRIFFIS, HAROLD L JR.  
8843 WEST BEN ROWE CIRCLE  
GLEN ST. MARY, FL 32040 US

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

GRIFFIS, HAROLD L JR.  
8843 WEST BEN ROWE CIRCLE  
MACCLENNY, FL 32063 US

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: HAROLD L. GRIFFIS, JR.

01/21/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GRIFFIS, HAROLD L JR.  
Address: 8843 WEST BEN ROWE CIRCLE  
City-St-Zip: MACCLENNY, FL 32063 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: HAROLD L. GRIFFIS, JR.

MGR

01/21/2010

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