

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000035964

Entity Name: LAB, LLC

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5040 LIMESTONE DR  
PORT RICHEY, FL 34668 US

**New Principal Place of Business:**

**Current Mailing Address:**

5040 LIMESTONE DR  
PORT RICHEY, FL 34668 US

**New Mailing Address:**

5040 LIMESTONE DR  
PORT RICHEY, FL 34668 US

FEI Number: 20-8780756

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BENNETT, WILLIAM B  
5040 LIMESTONE DR  
PORT RICHEY, FL 34668 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: BENNETT, WILLIAM B  
Address: 5040 LIMESTONE DR  
City-St-Zip: PORT RICHEY, FL 34668 US

Title: MGRM  
Name: O'BRIEN, MICHAEL A  
Address: 8031 NE HWY 19  
City-St-Zip: CRYSTAL RIVER, FL 34429 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: WILLIAM B. BENNETT

MGRM

04/28/2010

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