

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000056587

**Entity Name:** ANCHOR RIGHT LLC

**FILED**  
**Aug 25, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4197-A DELTONA BLVD  
CHIPLEY, FL 32428 US

**New Principal Place of Business:**

4197 DELTONA BLVD  
CHIPLEY, FL 32428 US

**Current Mailing Address:**

PO BOX 35545  
PANAMA CITY, FL 32412 US

**New Mailing Address:**

**FEI Number:** 37-1544965      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SCHULTE, ANGELA H  
4197 DELTONA BLVD  
CHIPLEY, FL 32428 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:** SCHULTE, ANGELA H  
**Address:** 4197 DELTONA BLVD  
**City-St-Zip:** CHIPLEY, FL 32428 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: ANGELA H SCHULTE      MGRM      08/25/2010

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