

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000082959

**FILED**  
**Mar 21, 2011**  
**Secretary of State**

**Entity Name:** STEVE HOSKINS ENTERPRISES, LLC

**Current Principal Place of Business:**

15216 US 19  
HUDSON, FL 34667 US

**New Principal Place of Business:**

11523 US 19  
PORT RICHEY, FL 34668 US

**Current Mailing Address:**

7316 HIDEAWAY TRAIL  
NEW PORT RICHEY, FL 34655 US

**New Mailing Address:**

**FEI Number:** 26-0721527      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HOSKINS, STEPHEN T  
7316 HIDEAWAY TRAIL  
NEW PORT RICHEY, FL 34655 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:** HOSKINS, STEPHEN T  
**Address:** 7316 HIDEAWAY TRAIL  
**City-St-Zip:** NEW PORT RICHEY, FL 34655 US

**Title:** MGR  
**Name:** FAULKNER, MELISSA  
**Address:** 7316 HIDEAWAY TRAIL  
**City-St-Zip:** NEW PORT RICHEY, FL 34655 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: STEPHEN HOSKINS

MGR

03/21/2011

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