

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000086411

**FILED**  
**Mar 19, 2010**  
**Secretary of State**

**Entity Name:** GRIGGS GROUP OF CENTRAL FLORIDA, LLC

**Current Principal Place of Business:**

4310 SW 142ND STREET ROAD  
OCALA, FL 34473

**New Principal Place of Business:**

4310 SW 142ND STREET ROAD  
OCALA, FL 34473 US

**Current Mailing Address:**

4310 SW 142ND STREET ROAD  
OCALA, FL 34473

**New Mailing Address:**

4310 SW 142ND STREET ROAD  
OCALA, FL 34473 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

DANIEL HICKS, P.A.  
421 S. PINE AVE.  
OCALA, FL 34471 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: GRIGGS, LARRY C  
Address: 4310 SW 142ND STREET ROAD  
City-St-Zip: Ocala, FL 34473 US

Title: MGR  
Name: SULEIMAN, MOHAMMAD  
Address: 4310 SW 142ND STREET ROAD  
City-St-Zip: Ocala, FL 34473 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: LARRY C. GRIGGS

MGR

03/19/2010

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