

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000093862

FILED  
Mar 02, 2009  
Secretary of State

Entity Name: MOBIL DONUTS LLC

**Current Principal Place of Business:**

14311 SPRING HILL DRIVE  
BROOKSVILLE, FL 346095234 US

**New Principal Place of Business:**

**Current Mailing Address:**

11089 SPRING HILL DRIVE  
SPRING HILL, FL 34608 US

**New Mailing Address:**

FEI Number: 26-0897795

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MASSON, THOMAS J  
98 FOREST WOOD COURT  
SPRING HILL, FL 34609 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 ( ) Delete  
Name: MASSON, THOMAS J  
Address: 98 FOREST WOOD CT  
City-St-Zip: SPRING HILL, FL 34609 US

Title: MGR ( ) Delete  
Name: CAVANAGH, CATHLEEN R  
Address: 9870 BAYSIDE CT  
City-St-Zip: SPRING HILL, FL 34608 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR ( ) Change (X) Addition  
Name: MASSON, SUSAN T  
Address: 98 FOREST WOOD CT  
City-St-Zip: SPRINGHILL, FL 34609

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: SUSAN T MASSON

MGR

03/02/2009

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