2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000006312

Address:

City-St-Zip:

118 S. ZANDER WAY

SANTA ROSA BEACH, FL 32459

Entity Name: HUFF COMMERCIAL, LLC

FILED Feb 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 4590 HIGHWAY 20E NICEVILLE, FL 32578 **Current Mailing Address: New Mailing Address:** 4590 HIGHWAY 20E NICEVILLE, FL 32578 FEI Number: 26-1775499 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HUFF, CHANDLER 4590 HIGHWAY 20E US NICEVILLE, FL 32578 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: ADDITIONS/CHANGES: MGR () Delete Title: () Change () Addition HUFF, CHANDLER Name: Name: Address: PO BOX 5244 Address: City-St-Zip: NICEVLLE, FL 32578 City-St-Zip: Title: MGR Title: () Delete () Change () Addition Name: HUFF, BRANDON Name: Address: PO BOX 5244 Address: City-St-Zip: NICEVILLE, FL 32578 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition BEAUCHAMP, BRIAN Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: CHANDLER HUFF MGRM 02/23/2009