

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000033881

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** HOLE SHOT TRANSPORT, L.L.C.

**Current Principal Place of Business:**

2913 SPANIEL LANE  
SEFFNER, FL 33584

**New Principal Place of Business:**

**Current Mailing Address:**

2913 SPANIEL LANE  
SEFFNER, FL 33584

**New Mailing Address:**

**FEI Number:** 30-0474064

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOFLEY, ROBERT GLENN  
2913 SPANIEL LANE  
SEFFNER, FL 33584 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 ( ) Delete  
Name: LOFLEY, ROBERT GLENN  
Address: 2913 SPANIEL LANE  
City-St-Zip: SEFFNER, FL 33584

Title: MGRM ( ) Delete  
Name: LOFLEY, ROBERT GLENN JR.  
Address: 4027 WARING DRIVE  
City-St-Zip: TAMPA, FL 33610

**ADDITIONS/CHANGES:**

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

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

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:** ROBERT G. LOFLEY, SR.

PRES

04/27/2009

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