

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000033881

**FILED**  
**May 18, 2010**  
**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:**

4914 CLEWIS AVENUE  
TAMPA, FL 33610

**Current Mailing Address:**

2913 SPANIEL LANE  
SEFFNER, FL 33584

**New Mailing Address:**

4914 CLEWIS AVENUE  
TAMPA, FL 33610

**FEI Number:** 30-0474064      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

LOFLEY, ROBERT GLENN  
2913 SPANIEL LANE  
SEFFNER, FL 33584      US

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

LOFLEY, SR., ROBERT G  
4914 CLEWIS AVENUE  
TAMPA, FL 33610      US

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: ROBERT G. LOFLEY, SR.

05/18/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** LOFLEY, ROBERT G PRES.  
**Address:** 4914 CLEWIS AVENUE  
**City-St-Zip:** TAMPA, FL 33610

**Title:** MGRM  
**Name:** LOFLEY, JR., ROBERT G V. PRES  
**Address:** 4914 CLEWIS AVENUE  
**City-St-Zip:** TAMPA, FL 33610

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: ROBERT G. LOFLEY, SR.

PRES

05/18/2010

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