

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000046172

Entity Name: CUTBOJC, LLC

FILED  
May 18, 2009  
Secretary of State

## Current Principal Place of Business:

1628 SW IVY PLACE  
DUNNELLON, FL 34431

## New Principal Place of Business:

1105 FT CLARKE BLVD  
STE 614  
GAINESVILLE, FL 32606

## Current Mailing Address:

P.O. BOX 3209  
DUNNELLON, FL 34430

## New Mailing Address:

1105 FT CLARKE BLVD  
STE 614  
GAINESVILLE, FL 32606

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:

## Name and Address of New Registered Agent:

TAX RESOURCE CENTER OF FLORIDA, INC.  
20401 NW 2 AVE. SUITE 103  
MIAMI, FL 33169 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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: HURLOCK, ADRIAN  
Address: 1628 SW IVY PLACE  
City-St-Zip: DUNNELLON, FL 34431

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: HURLOCK, ADRIAN  
Address: 1105 FT CLARKE BLVD  
City-St-Zip: GAINESVILLE, FL 32606

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: ADRIAN HURLOCK

P

05/18/2009

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