

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000046530

Entity Name: RICHARD HERRON, L.L.C.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

189 BOB MILLER RD
CRAWFORDVILLE, FL 32327

New Principal Place of Business:

Current Mailing Address:

189 BOB MILLER RD
CRAWFORDVILLE, FL 32327

New Mailing Address:

FEI Number: 33-1214868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HERRON, RICHARD
2110 REGISTER ROAD
TALLAHASSEE, FL 32305 US

Name and Address of New Registered Agent:

HERRON, RICHARD
189 BOB MILLER RD.
CRAWFORDVILLE, FL 32327 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: RICHARD HERRON

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HERRON, RICHARD
Address: 2110 REGISTER ROAD
City-St-Zip: TALLAHASSEE, FL 32305

Title: MGRM () Delete
Name: GREGORY, JONATHAN
Address: 165 VICTORIA AVE
City-St-Zip: TALLAHASSEE, FL 32333

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HERRON, RICHARD
Address: 189 BOB MILLER RD.
City-St-Zip: CRAWFORDVILLE, FL 32327

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: RICHARD HERRON

MGRM

04/30/2009

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