

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000048228

FILED  
Sep 17, 2009  
Secretary of State

**Entity Name:** ADVANCED CONNECTIONS & REPAIR, LLC.

**Current Principal Place of Business:**

212 WILDFLOWER LN.  
CRAWFORDVILLE, FL 32327 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1142  
CRAWFORDVILLE, FL 32326

**New Mailing Address:**

**FEI Number:** 80-0196606 **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:**

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

TUTTLE, IAN L  
212 WILDFLOWER LN.  
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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FREEMAN, MARJORIE A  
Address: 212 WILDFLOWER LN.  
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: MGRM ( ) Delete  
Name: TUTTLE, IAN LEE  
Address: 212 WILDFLOWER LN.  
City-St-Zip: CRAWFORDVILLE, FL 32327 US

Title: MGRM ( ) Delete  
Name: MOSELEY, DANIEL E JR.  
Address: P.O. BOX 1142  
City-St-Zip: CRAWFORDVILLE, FL 32326

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: TREADWAY, JEFF  
Address: P. O. BOX 1142  
City-St-Zip: CRAWFORDVILLE, FL 32326 US

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: IAN LEE TUTTLE

MGRM

09/17/2009

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