

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000061866

Entity Name: TOBACCO STATE, L.L.C.

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

160 MORRIS LAKE DRIVE  
HAWTHORNE, FL 32640 US

**New Principal Place of Business:**

**Current Mailing Address:**

160 MORRIS LAKE DRIVE  
HAWTHORNE, FL 32640 US

**New Mailing Address:**

FEI Number: 32-0252989

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

SPEARS, MARK R  
160 MORRIS LAKE DRIVE  
HAWTHORNE, FL 32640 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: MGRM  
Name: SPEARS, MARK R  
Address: 160 MORRIS LAKE DRIVE  
City-St-Zip: HAWTHORNE, FL 32640 US

Title: V.P.  
Name: TIMOTHY, ROSS S  
Address: 27039 RED FOX DRIVE  
City-St-Zip: BROOKSVILLE, FL 34602 US

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: MARK SPEARS

PRES

01/07/2010

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