

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000071557

Entity Name: HOAX.COM, LLC

**FILED**  
**Mar 25, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2840 WEST BAY DRIVE  
SUITE 349  
BELLEAIR BLUFFS, FL 33770

**New Principal Place of Business:**

**Current Mailing Address:**

2840 WEST BAY DRIVE  
SUITE 349  
BELLEAIR BLUFFS, FL 33770

**New Mailing Address:**

FEI Number: 26-3044738

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GARDNER, MICHAEL H  
2840 WEST BAY DRIVE  
STE 349  
BELLAIRE, FL 33770 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: GARDNER, MICHAEL H  
Address: 2840 WEST BAY DRIVE STE 349  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

Title: MGRM  
Name: DESHONG, MARK  
Address: 2840 WEST BAY DRIVE STE 349  
City-St-Zip: BELLEAIR BLUFFS, FL 33770

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: SANDRA F GARDNER

SECT

03/25/2010

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