

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000108629

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** DUHART MANAGEMENT LLC

**Current Principal Place of Business:**

502A NE AVENUE A  
CARRABELLE, FL 32322

**New Principal Place of Business:**

226 JACOBIE O'NEAL LANE  
APALACHICOLA, FL 32320

**Current Mailing Address:**

502A NE AVENUE A  
CARRABELLE, FL 32322

**New Mailing Address:**

226 JACOBIE O'NEAL LANE  
APALACHICOLA, FL 32320

**FEI Number:** 26-3778746

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

DUHART, MICHAEL B  
502A NE AVENUE A  
CARRABELLE, FL 32322 US

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

DUHART, MICHAEL B  
226 JACOBIE O'NEAL LANE  
APALACHICOLA, FL 32320 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:**

02/16/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** DUHART, MICHAEL B  
**Address:** 226 JACOBIE O'NEAL LANE  
**City-St-Zip:** APALACHICOLA, FL 32320

**Title:** MGRM  
**Name:** DUHART, JAIME L  
**Address:** 226 JACOBIE O'NEAL LANE  
**City-St-Zip:** APALACHICOLA, FL 32320

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:** MICHAEL B. DUHART

MGRM

02/16/2011

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