

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000112837

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Entity Name:** BUNKIE CRIBS LLC

**Current Principal Place of Business:**

806 SORRENTO PLACE  
NOKOMIS, FL 34274

**New Principal Place of Business:**

806 SORRENTO PLACE  
NOKOMIS, FL 34275

**Current Mailing Address:**

PO BOX 1827  
NOKOMIS, FL 34274

**New Mailing Address:**

**FEI Number:** 26-4225481

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DILWORTH, WILLIAM D  
806 SORRENTO PLACE  
NOKOMIS, FL 34274 US

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

DILWORTH, WILLIAM D  
806 SORRENTO PLACE  
NOKOMIS, FL 34275 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:

01/13/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DILWORTH, WILLIAM D  
Address: 806 SORRENTO PL (PO BOX 1827)  
City-St-Zip: NOKOMIS, FL 34275

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: WILLIAM D DILWORTH

PRES

01/13/2010

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