

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000012483

**FILED**  
**Jan 08, 2010**  
**Secretary of State**

**Entity Name:** SAMUEL STEVENS & ASSOCIATES, LLC

**Current Principal Place of Business:**

6242 E. BAY BLVD  
GULF BREEZE, FL 32563 US

**New Principal Place of Business:**

**Current Mailing Address:**

6242 E. BAY BLVD  
GULF BREEZE, FL 32563 US

**New Mailing Address:**

**FEI Number:** 80-0348596

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DOUGHERTY, STEVEN C  
6242 E. BAY BLVD  
GULF BREEZE, FL 32563 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:** MGMR  
**Name:** DOUGHERTY, STEVEN C  
**Address:** 6242 E. BAY BLVD  
**City-St-Zip:** GULF BREEZE, FL 32563 US

**Title:** MGRM  
**Name:** DOUGHERTY, SAMUEL A  
**Address:** 5857 TIMBERLINE DR  
**City-St-Zip:** MILTON, FL 32570 US

**Title:** MR.  
**Name:** HESLIN, WILLIAM F JR.  
**Address:** 7049 LAGO MIRADA  
**City-St-Zip:** NAVARRE, FL 32566

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:** STEVEN CARL DOUGHERTY

MR.

01/08/2010

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