

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000023828

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

**Entity Name:** SAMUEL MAST OF LEON LLC

**Current Principal Place of Business:**

4428 WIDGEON WAY  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

4428 WIDGEON WAY  
TALLAHASSEE, FL 32303

**New Mailing Address:**

**FEI Number:** 26-4426203      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

BENFIELD, RON  
58 SIOUX CIRCLE  
HAVANA, FL 32333      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:** MAST, SAMUEL  
**Address:** 4428 WIDGEON WAY  
**City-St-Zip:** TALLAHASSEE, FL 32303

**Title:** MGRM  
**Name:** BARRAGAN, MARTHA  
**Address:** 4428 WIDGEON WAY  
**City-St-Zip:** TALLAHASSEE, FL 32303

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: SAMUEL MAST

MGRM

05/07/2010

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