

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000003613

Entity Name: H C SELLARS, LLC

**FILED**  
**Apr 22, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

665 FOREST LAIR  
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

**Current Mailing Address:**

665 FOREST LAIR  
TALLAHASSEE, FL 32312

**New Mailing Address:**

FEI Number: 27-1876742

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

PIERCE, ROBERT A  
123 SOUTH CALHOUN STREET  
TALLAHASSEE, FL 323011805 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: FERNANDEZ, JUDITH K  
Address: 11535 BRIAR HOLLOW LANE  
City-St-Zip: CLERMONT, FL 34711

Title: MGRM  
Name: SELLARS, CHARLES A  
Address: 1984 YOUNG LANE  
City-St-Zip: CHAPEL HILL, TN 37034

Title: MGRM  
Name: DIESTELHORST, ALICE S  
Address: 665 FOREST LAIR  
City-St-Zip: TALLAHASSEE, FL 32312

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: JUDITH K FERNANDEZ

MGRM

04/22/2012

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