

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Mar 01, 2010
Secretary of State

Entity Name: CABBAGE HAMMOCK COMPANY, LLC

Current Principal Place of Business:

4310 PABLO OAKS COURT
JACKSONVILLE, FL 32224

New Principal Place of Business:

Current Mailing Address:

4310 PABLO OAKS COURT
JACKSONVILLE, FL 32224

New Mailing Address:

FEI Number: 59-3609702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D.D.I., INC.
4310 PABLO OAKS COURT
JACKSONVILLE, FL 32224 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: DV
Name: DAVIS, ROBERT D
Address: 4310 PABLO OAKS COURT
City-St-Zip: JACKSONVILLE, FL 32224

Title: DPT
Name: ZAHRA, E ELLIS JR
Address: 4310 PABLO OAKS COURT
City-St-Zip: JACKSONVILLE, FL 32224

Title: VAS
Name: FRANCIS, HARRY D
Address: 4310 PABLO OAKS COURT
City-St-Zip: JACKSONVILLE, FL 32224

Title: DC
Name: DAVIS, A DANO
Address: 4310 PABLO OAKS COURT
City-St-Zip: JACKSONVILLE, FL 32224

Title: V
Name: OKO, SCOTT A
Address: 4310 PABLO OAKS COURT
City-St-Zip: JACKSONVILLE, FL 32224

Title: S
Name: MORGAN, JUDY B
Address: 4310 PABLO OAKS CT
City-St-Zip: JACKSONVILLE, FL 32224

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: JUDY B MORGAN

S

03/01/2010

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