

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000002224

**FILED**  
**Jan 20, 2010**  
**Secretary of State**

**Entity Name:** EXECUTIVE OUTCOMES, LLC

**Current Principal Place of Business:**

102 NORTH MAIN STREET  
FORTVILLE, IN 46050

**New Principal Place of Business:**

102 NORTH MAIN STREET  
FORTVILLE, IN 46040

**Current Mailing Address:**

102 NORTH MAIN STREET  
FORTVILLE, IN 46040

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

HUFNAGEL, PAUL  
33 WEST PELICAN STREET  
NAPLES, FL 34113    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: HURLBUTT, TOM  
Address: 102 NORTH MAIN STREET  
City-St-Zip: FORTVILLE, IN 46040

Title: MGRM  
Name: HUFFMAN, ORVAL  
Address: 102 NORTH MAIN STREET  
City-St-Zip: FORTVILLE, IN 46040

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: ORVAL E. HUFFMAN                      PRIN                      01/20/2010

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