

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M99000000929

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** HUDSON MANAGEMENT, LLC

**Current Principal Place of Business:**

217 OAK AVE  
ANNA MARIA, FL 34216

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 856  
ANNA MARIA, FL 34216

**New Mailing Address:**

**FEI Number:** 65-0796836

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZIGULICH, JOSEPH D JR.  
217 OAK AVE  
ANNA MARIA, FL 34216 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:** BASEMAN, BARBARA  
**Address:** 217 OAK AVE. (P.O. BOX 856)  
**City-St-Zip:** ANNA MARIA, FL 34216

**Title:** MGRM  
**Name:** ZIGULICH, PATRICIA  
**Address:** 217 OAK AVE. (P.O. BOX 856)  
**City-St-Zip:** ANNA MARIA, FL 34216

**Title:** MGRM  
**Name:** ZIGULICH, JOSEPH  
**Address:** 217 OAK (P.O. BOX 856)  
**City-St-Zip:** ANNA MARIA, FL 34216

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:** JOSEPH ZIGULICH

MGRM

04/25/2011

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