

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078695

Entity Name: HUBER PROPERTIES, LLC**Current Principal Place of Business:**14020 SIMMONS LAKE ROAD
BROOKSVILLE, FL 34601**Current Mailing Address:**14020 SIMMONS LAKE ROAD
BROOKSVILLE, FL 34601**FEI Number:** 73-1722361**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HUBER ITOH, LINDA L
14020 SIMMONS LAKE ROAD
BROOKSVILLE, FL 34601 US*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

Authorized Person(s) Detail :

Title P
Name HUBER, MARY L
Address 14020 SIMMONS LAKE ROAD
City-State-Zip: BROOKSVILLE FL 34601

Title VP
Name HUBER, HENRY HJR.
Address 14020 SIMMONS LAKE ROAD
City-State-Zip: BROOKSVILLE FL 34601

Title T
Name HUBER ITOH, LINDA L
Address 14020 SIMMONS LAKE ROAD
City-State-Zip: BROOKSVILLE FL 34601

Title S
Name ITOH, CHRISTOPHER J
Address 14020 SIMMONS LAKE ROAD
City-State-Zip: BROOKSVILLE FL 34601

Title AS
Name HUBER, RICHARD H
Address 14020 SIMMONS LAKE ROAD
City-State-Zip: BROOKSVILLE FL 34601

Title ASSISTANT TREASURER
Name HUBER, STEVEN H
Address 14020 SIMMONS LAKE ROAD
City-State-Zip: BROOKSVILLE FL 34601

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LINDA HUBER ITOH**TREASURER****03/24/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date