

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000075512

**Entity Name:** HARRIS DIAZ LLC

**Current Principal Place of Business:**

C/O HOWARD & WALLE  
4324 NW 27TH TERRACE  
GAINESVILLE, FL 32605

**Current Mailing Address:**

PO BOX 359014  
GAINESVILLE, FL 32635

**FEI Number:** 45-2682930

**Certificate of Status Desired:** No

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

WALLE, DAVID  
4324 NW 27TH TERRACE  
GAINESVILLE, FL 32605 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 MGRM  
Name U S PENSION ADMINISTRATION LLC  
Address 2711 CENTERVILLE RD, STE 120  
#6636  
City-State-Zip: WILMINGTON DE 19808

Title VP  
Name WALLE, DAVID  
Address PO BOX 359014  
City-State-Zip: GAINESVILLE FL 32635

Title CFO  
Name WALLE, DAVID  
Address PO BOX 359014  
City-State-Zip: GAINESVILEL FL 32635

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVID WALLE, VP & CFO

VP & CFO

04/30/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date