2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

04-14-2005 90030 012 ****50.00
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FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # L02000034908

1. Entity Name
HATCH MOTT MACDONALD FLORIDA, LLC

Principal Place of Business	Mailing Address
5111 NORTH 12TH AVENUE PENSACOLA, FL 32504	27 BLEEKER ST. MILLBURN, NJ 07041

03112005 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1294824 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2005

Make check payable to: Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR DENICHILO, NICHOLAS M 27 BLEEKER ST. MILLBURNA, NJ 07041	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MILLBURN, NJ 07041	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR CARLAN, CHARLES H 5111 N. 12TH AVE. PENSACOLA, FL 32504	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR WICKENS, PETER J 27 BLEEKER ST. MILLBURN, NJ 07041	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR BLACKBURN, MICHAEL O 27 BLEEKER ST. MILLBURN, NJ 07041	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR HOWELLS, KEITH J 27 BLEEKER ST. MILLBURN, NJ 07041	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR THIRLWALL, TIMOTHY J 27 BLEEKER ST. MILLBURN, NJ 07041	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR DICK, MARC 5111 N. 12TH AVE. PENSACOLA, FL 32504	☐ Change ☒ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____ NICHOLAS M. DENICHILO 4-8-05 973-379-3400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #