


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 12, 2005 8:00 am
Secretary of State

05-12-2005 90029 033 ****50.00

DOCUMENT # L03000020231 1. Entity Name H&T COMMERCIAL PROPERTIES, LLC	
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Principal Place of Business 3901 NE 12TH AVE. POMPANO BEACH, FL 33064	Mailing Address 3901 NE 12TH AVE. POMPANO BEACH, FL 33064
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DO NOT WRITE IN THIS SPACE

20058618



03142005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 61-1451996	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, DENNIS D ESQ
C/O TRIPP SCOTT, PA
110 SE 6TH ST., 15TH FLOOR
FT LAUDERDALE, FL 33301

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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**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WHITE, HOWARD 3901 NE 128 AVE. POMPANO BEACH, FL 33064
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP WHITE, HORACE S 3901 NE 12TH AVE POMPANO BEACH, FL 33064
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

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: *Howard White* **3-31-05 954-943-8002**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #