


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90178 001 ***200.00

DOCUMENT # L06000053050

1. Entity Name
HUSSEY & HUSSEY, LLC



Principal Place of Business Mailing Address
3968 TANGLE DR. **3968 TANGLE DR.**
TITUSVILLE, FL 32796 **TITUSVILLE, FL 32796**

30006099



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

04262007 Chg-LLC CR2E083 (12/06)

6. Name and Address of Current Registered Agent

HUSSEY, JANICE
3968 TANGLE DR.
TITUSVILLE, FL 32796

7. Name and Address of New Registered Agent

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, 2007

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
 NAME **HUSSEY, JANICE** Delete
 STREET ADDRESS **3968 TANGLE DR.**
 CITY-ST-ZIP **TITUSVILLE, FL 32796**

TITLE Delete
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10. ADDITIONS/CHANGES

TITLE Change Addition
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TITLE Change Addition
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TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Janice Hussey 4-26-07 (321)393-8592
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #