

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000074511

**FILED**  
**May 03, 2010**  
**Secretary of State**

**Entity Name:** HANDOVER INVESTMENTS, LLC

**Current Principal Place of Business:**

1072 PENINSULA DR.  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

2928 4TH ST  
#50  
SANTA MONICA, CA 90405 US

**Current Mailing Address:**

1072 PENINSULA DR.  
ORMOND BEACH, FL 32174

**New Mailing Address:**

2928 4TH ST  
#50  
SANTA MONICA, CA 90405 US

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SHERRIE, HINES  
1072 PENINSULA DR.  
ORMOND BEACH, FL 32174 US

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

SHARON, CASON  
19 TROTTER CT.  
DAYTONA BEACH, FL 32119 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: SHARON CASON

05/03/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MS  
Name: SHERRIE, HINES  
Address: 1072 PENINSULA DR  
City-St-Zip: ORMOND BEACH, FL 32174

I hereby certify that the information indicated on this 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.

SIGNATURE: SHERRIE HINES

MS

05/03/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date