# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Feb 26, 2009**
**Secretary of State**

DOCUMENT# L06000091784

**Entity Name:** HH&S, LLC

**Current Principal Place of Business:**

2241 TWELVE OAKS WAY
SUITE 102
WESLEY CHAPEL, FL 33544 US

**New Principal Place of Business:**

**Current Mailing Address:**

31421 ANNISTON DRIVE
WESLEY CHAPEL, FL 33543 US

**New Mailing Address:**

**FEI Number: 20-5601586** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

F&L CORP.
ONE INDEPENDENT DRIVE, SUITE 1300
JACKSONVILLE, FL 322025017 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: DIR ( ) Delete
Name: HRADEK, AMY K
Address: 31421 ANNISTON DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: DIR ( ) Delete
Name: HRADEK, JASON R
Address: 31421 ANNISTON DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: DIR ( ) Delete
Name: SCHNEEBERGER, BRADLEY S
Address: 1209 HIGH HOLLOW
City-St-Zip: MECHANICSBURG, PA 17050 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: AMY K HRADEK DIR 02/26/2009

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