

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000104873

**FILED**  
**May 09, 2012**  
**Secretary of State**

**Entity Name:** HAV LEOPARD 46 1090 L.L.C.

**Current Principal Place of Business:**

228 BAYSHORE DRIVE  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

2245 CLEVELAND AVE  
FORT MYERS, FL 33901

**Current Mailing Address:**

228 BAYSHORE DRIVE  
CAPE CORAL, FL 33904

**New Mailing Address:**

2245 CLEVELAND AVE  
FORT MYERS, FL 33901

FEI Number: 27-1271464

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HEALY, SCOTT A  
228 BAYSHORE DRIVE  
CAPE CORAL, FL 33904 US

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

HEALY, SCOTT A  
2245 CLEVELAND AVE  
FORT MYERS, FL 33901 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: \_\_\_\_\_

Electronic Signature of Registered Agent

05/09/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HEALY, SCOTT A  
Address: 2245 CLEVELAND AVE  
City-St-Zip: FORT MYERS, FL 33901 US

Title: MGRM  
Name: HEALY, APRIL  
Address: 2245 CLEVELAND AVE  
City-St-Zip: FORT MYERS, FL 33901 US

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: SCOTT A. HEALY

MR

05/09/2012

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