


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 30, 2008 8:00 am
Secretary of State

04-28-2008 90042 032 ***138.75

DOCUMENT # M05000005705			
1. Entity Name HIBISCUS BOULEVARD 12, LLC			
Principal Place of Business 101 N MAIN ST STE 1203 GREENVILLE, SC 29601		Mailing Address 101 N MAIN ST STE 1203 GREENVILLE, SC 29601	
2. Principal Place of Business - No P.O. Box # 101 N. Main Street Suite, Apt. #, etc. 12th Floor City & State Greenville, SC Zip 29601		3. Mailing Address 101 N. Main Street Suite, Apt. #, etc. 12th Floor City & State Greenville, SC Zip 29601	
Country USA		Country USA	
4. FEI Number NOT APPLICABLE		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 NRA Services, Inc. 2731 Executive Park Dr. Suite 4 Weston, FL 33331		7. Name and Address of New Registered Agent Name Address City State Zip FL	
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 reissuing)		DATE	
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HOWARD H STONE REVOCABLE TRUST 101 N MAIN ST STE 1203 GREENVILLE, SC 29601 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Member 101 N. Main St. 12th Floor <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: <i>Howard H. Stone</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date: 3/8/08 Daytime Phone #: 800-577-4842	

Trustee