

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000025578

Entity Name: HM PROPERTIES, LLC**Current Principal Place of Business:**1715 S.E. TIFFANY AVENUE
PORT ST. LUCIE, FL 34982**Current Mailing Address:**PO BOX 2028
JENSEN BEACH, FL 34958 US**FEI Number:** 57-1178020**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DELROWE, DANIEL JMD
1715 S.E. TIFFANY AVENUE
PORT ST. LUCIE, FL 34982 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

Date

Authorized Person(s) Detail :

Title MGRM
Name DELROWE, DANIEL J
Address 1715 SOUTHEAST TIFFANY AVENUE
City-State-Zip: PORT SAINT LUCIE FL 34952

Title MGR
Name LANGLEY, KEN
Address 1715 SOUTHEAST TIFFANY AVENUE
City-State-Zip: PORT SAINT LUCIE FL 34952

Title MGR
Name MATAMOROS, SILVIANO
Address 1715 SOUTHEAST TIFFANY AVENUE
City-State-Zip: PORT SAINT LUCIE FL 34952

Title MGR
Name CHANNON, CHRIS T
Address 1715 SOUTHEAST TIFFANY AVENUE
City-State-Zip: PORT SAINT LUCIE FL 34952

Title MGR
Name MALLONEE, JOHN D
Address 1715 SOUTHEAST TIFFANY AVENUE
City-State-Zip: PORT SAINT LUCIE FL 34952

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIEL DELROWE**MGRM****03/06/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date