

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000084693

**Entity Name:** HTW HOUSING LLC

**Current Principal Place of Business:**

1303 TROPICAL COVE DR.  
MERRITT ISLAND, FL 32952

**Current Mailing Address:**

1303 TROPICAL COVE DR.  
MERRITT ISLAND, FL 32952 US

**FEI Number:** 27-3319008

**Certificate of Status Desired:** No

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

TABACK, MONTE  
1303 TROPICAL COVE DR.  
MERRITT ISLAND, FL 32952 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 HETTINGER, BRIAN  
Address 1303 TROPICAL COVE DR.  
City-State-Zip: MERRITT ISLAND FL 32952

Title MGRM  
Name WINN, KEN  
Address 1303 TROPICAL COVE DR.  
City-State-Zip: MERRITT ISLAND FL 32952

Title MGRM  
Name TABACK, MONTE  
Address 1303 TROPICAL COVE DR.  
City-State-Zip: MERRITT ISLAND FL 32952

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BRIAN HETTINGER

MEMBER

03/31/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date