

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000001942

Entity Name: HI-ZI, LLC

FILED  
Jan 30, 2009  
Secretary of State

## Current Principal Place of Business:

8601 BEACH BLVD  
UNIT 204  
JACKSONVILLE, FL 32216

## New Principal Place of Business:

## Current Mailing Address:

8601 BEACH BLVD  
UNIT 204  
JACKSONVILLE, FL 32216

## New Mailing Address:

FEI Number: 59-3630402

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FORD, NANCY P  
8601 BEACH BLVD  
UNIT 204  
JACKSONVILLE, FL 32216 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: MGRM ( ) Delete  
Name: PACE, JOHNSON H  
Address: 135 TRIPLE OAK DRIVE  
City-St-Zip: ANDERSON, SC 29625 US

Title: MGR ( ) Delete  
Name: FORD, NANCY PACE  
Address: 8601 BEACH BLVD, UNIT 204  
City-St-Zip: JACKSONVILLE, FL 32216 US

Title: MGRM ( ) Delete  
Name: CHANCEY, MARGARET P  
Address: 4543 BULL RUN ROAD  
City-St-Zip: JACKSONVILLE, FL 32210 US

Title: MGRM ( ) Delete  
Name: PACE, JAMES H  
Address: 4083 SUNBEAM ROAD, APT 2313  
City-St-Zip: JACKSONVILLE, FL 32257 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:

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: NANCY P FORD

MGR

01/30/2009

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