


FILED
Apr 28, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000014056


1. Entity Name
HQM OF FENTRESS, L.L.C.



Apr 28, 2005 08:00 AM
Secretary of State

Principal Place of Business
2979 PGA BLVD.
PALM BEACH GARDENS FL 33410

Mailing Address
2979 PGA BLVD.
PALM BEACH GARDENS FL 33410


1st MOORE CR2E083 (10/04)

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number
65-1056151
Applied For
Not Applicable

5. Certificate of Status Desired
\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
ADAMS, SANDRA L
2979 PGA BLVD.
PALM BEACH GARDENS FL 33410

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2005

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGRM
HQM SPECIAL ASSET MANAGEMENT INC
2979 PGA BLVD.
PALM BEACH GARDENS FL 33410

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CITY-ST-ZIP

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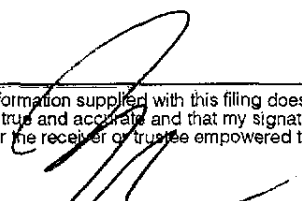
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

4-22-05 561-627-0664