

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000001224

Entity Name: HASCALL FAMILY, L.L.C.

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

300 BEACH DRIVE NE
#2402
ST. PETERSBURG, FL 33701

Current Mailing Address:

300 BEACH DRIVE NE
#2402
ST. PETERSBURG, FL 33701

New Principal Place of Business:

400 BEACH DRIVE NE
#2705
ST. PETERSBURG, FL 33701

New Mailing Address:

400 BEACH DRIVE NE
#2705
ST. PETERSBURG, FL 33701

FEI Number: 59-3693128

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAJMY, JOSEPH L ESQ.
1205 MANATEE AVE. W
BRADENTON, FL 34205 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: P () Delete
Name: HASCALL, JEANNINE
Address: 300 BEACH DRIVE NE #2402
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: VP () Delete
Name: HASCALL, JAMES G
Address: 300 BEACH DRIVE NE #2402
City-St-Zip: SAINT PETERSBURG, FL 33701

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: HASCALL, JEANNINE
Address: 400 BEACH DRIVE NE #2705
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: VP (X) Change () Addition
Name: HASCALL, JAMES G
Address: 400 BEACH DRIVE NE #2705
City-St-Zip: SAINT PETERSBURG, FL 33701

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: JEANNINE HASCALL

P

04/15/2009

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