

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000014307

Entity Name: HMK MANAGEMENT LLC

FILED
Apr 26, 2006
Secretary of State

Current Principal Place of Business:

300 E. CHURCH STREET
APT.#309
ORLANDO, FL 32801

New Principal Place of Business:

1353 PALMETTO AVENUE
SUITE 120
WINTER PARK, FL 32789

Current Mailing Address:

PO BOX 1742
WINTER PARK, FL 32790

New Mailing Address:

FEI Number: 59-3744032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARNOLD, MATHENY & EAGAN, P.A.
605 EAST ROBINSON STREET
SUITE 730
ORLANDO, FL 32801 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: KING, HELEN M
Address: 300 E. CHURCH STREET -APT#309
City-St-Zip: ORLANDO, FL 32801

Title: MGRM () Delete
Name: JOHNSON, MARTHA K
Address: 1800 ESPANOLA DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: MGR () Delete
Name: GRAHAM, ROBERT C
Address: 1353 PALMETTO AVENUE -SUITE 120
City-St-Zip: WINTER PARK, FL 32789

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:

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT CRAIG GRAHAM

MGR

04/26/2006

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