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**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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DOCUMENT # L02000005090		05 APR 20 3:20	
1. Entity Name HHR, LLC		SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business MOTE SCIENTIFIC FOUNDATION 1600 KEN THOMPSON PKWY SARASOTA, FL 34236		Mailing Address MOTE SCIENTIFIC FOUNDATION 1600 KEN THOMPSON PKWY SARASOTA, FL 34236	
2. Principal Place of Business Subs. Apt. #, etc.		3. Mailing Address Subs. Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 02-0690115		Applied For Not Applicable	
5. Certificate of Status Desired ☐		Additional Fee Required ☐	
6. Name and Address of Current Registered Agent MOTE SCIENTIFIC FOUNDATION, INC. 1600 KEN THOMPSON PKWY SARASOTA, FL 34236		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 _____ DATE _____ Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when releasing)			
Filing Fee is \$90.00 Due by May 1, 2005		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HULL, PETER 3837 WHITE LANE SARASOTA, FL 34242 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PRATT, HELEN 4603 SELMA STREET SARASOTA, FL 34232 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GALLIANO, BILL 1023 MANATEE AVE W BRADENTON, FL 34205 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MAHADEVAN, KUMAR 5420 AZURE WAY SARASOTA, FL 34242 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RITCHIE, BILL 32 55TH AVE SAINT PETERSBURG, FL 33706 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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: _____		2/4/05	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date	