

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

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Mar 10, 2005 8:00 am
Secretary of State

03-10-2005 90035 049 *****50.00

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02062005 Chg-LLC CR2E083 (10/03)

DOCUMENT # L02000008104 1. Entity Name HANUKA BROS. REALTY L.L.C.					
Principal Place of Business 126 PINEHURST CIRCLE NAPLES, FL 34113			Mailing Address 126 PINEHURST CIRCLE NAPLES, FL 34113		
2. Principal Place of Business 1807 WHITECAP CIRCLE Suite, Apt. #, etc.		3. Mailing Address P.O. Box 1479 Suite, Apt. #, etc.			
City & State N. FT. MYERS FL		City & State FT. MYERS, FL		4. FEI Number 04-3635146	
Zip 33903		Country USA		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent HANUKA, DANIEL 126 PINEHURST CIRCLE NAPLES, FL 34113			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1807 WHITECAP CIRCLE City N. FT. MYERS FL Zip Code 33903		
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: <u>Daniel Hanuka</u> DANIEL HANUKA MANNING 2/24/05 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning) DATE					
Filing Fee is \$50.00 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	MGR HANUKA, DANIEL 126 PINEHURST CIRCLE NAPLES, FL 34113	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HANUKA, JAMIE 2400 CASTLETOWER ROAD TALLAHASSEE, FL 32301	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HANUKA, JAMIE 2400 CASTLETOWER ROAD TALLAHASSEE, FL 32301	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HANUKA, JAMIE 2400 CASTLETOWER ROAD TALLAHASSEE, FL 32301	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HANUKA, JAMIE 2400 CASTLETOWER ROAD TALLAHASSEE, FL 32301	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HANUKA, JAMIE 2400 CASTLETOWER ROAD TALLAHASSEE, FL 32301	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HANUKA, JAMIE 2400 CASTLETOWER ROAD TALLAHASSEE, FL 32301	☐ Delete			
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: <u>Daniel Hanuka</u> DANIEL HANUKA 2/24/05 652-4600 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					