

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016638

FILED
Apr 14, 2009
Secretary of State

Entity Name: HIERS PROPERTIES, L.L.C.

Current Principal Place of Business:

1095 MORNINGSIDE DR.
VERO BEACH, FL 32963

New Principal Place of Business:

Current Mailing Address:

1095 MORNINGSIDE DR.
VERO BEACH, FL 32963

New Mailing Address:

FEI Number: 59-2367702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FENNELL, TODD W
979 BEACHLAND BLVD.
VERO BEACH, FL 32963 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: MGR () Delete
Name: HIERS, BOBBY J
Address: 1095 MORNINGSIDE DR
City-St-Zip: VERO BEACH, FL 32963

Title: MGR () Delete
Name: HIERS, MARY F
Address: 1095 MORNINGSIDE DR
City-St-Zip: VERO BEACH, FL 32963

Title: MGRM () Delete
Name: BUTZ, PAMELA
Address: 686 3RD PL
City-St-Zip: VERO BEACH, FL 32962

Title: MGRM () Delete
Name: GIANOTTI, SHELLY
Address: 686 3RD PL
City-St-Zip: VERO BEACH, FL 32962

Title: MGRM () Delete
Name: HYERS, KELLY
Address: 686 3RD PL
City-St-Zip: VERO BEACH, FL 32962

Title: MGRM () Delete
Name: HOCKENHULL, STACY A
Address: 686 3RD PL
City-St-Zip: VERO BEACH, FL 32962

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:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: HIERS, KELLY
Address: 686 3RD PL
City-St-Zip: VERO BEACH, FL 32962

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARY F. HIERS

MGR

04/14/2009

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