


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 11, 2008 08:00 AM
Secretary of State

DOCUMENT # L02000017463 1. Entity Name HALL & MOLA PROPERTIES, L.L.C.	
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Principal Place of Business 2025 LAGUNA WAY NAPLES, FL 34109	Mailing Address 2025 LAGUNA WAY NAPLES, FL 34109
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DO NOT WRITE IN THIS SPACE



01072008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-0000049	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

CONROY, J. THOMAS III
 2210 VANDERBILT BEACH ROAD
 SUITE 1201
 NAPLES, FL 34109

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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 title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HALL FAMILY PARTNERSHIP, LTD. 700 OCEAN ROYALE WAY JUNO BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOLA, DAVID 2025 LAGUNA WAY NAPLES, FL 34109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOLA, MARYBETH 2025 LAGUNA WAY NAPLES, FL 34109
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 01/11/08-80024-020 138.75

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Marybeth Mola* *1/7/08* *2395926145*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #