## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000020253

Entity Name: HKC ENTERPRISE, L.C.

City-St-Zip:

FILED Apr 22, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2008 PALACO GRANDE PKWY CAPE CORAL, FL 33904 **Current Mailing Address: New Mailing Address:** 5109 DEL PRADO BOULEVARD CAPE CORAL, FL 33904 FEI Number: 01-0741023 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARTEL, VIOLA 5109 DEL PRADO BOULEVARD CAPE CORAL, FL 33904 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/MEMBERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SAUER, HORST R Name: Name: Address: HASENHAEGWEG 79 Address: City-St-Zip: ASCHAFFENBURG/GERMANY, D 63741 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: KUFNER-SAUER, KRISTINA S Name: Address: HASENHAEGWEG 79 Address: City-St-Zip: ASCHAFFENBURG/GERMANY, D 63741 City-St-Zip: Title: () Delete Title: MGRM ( ) Change (X) Addition Name: SAUER, CLAUDIA Name: HASENHAEGWEG 79 Address: Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

ASCHAFFENBURG/GERMANY, D 63741

SIGNATURE: HORST SAUER MGRM 04/22/2005