## **2008 LIMITED LIABILITY COMPANY**

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

TITLE

2639-B W. MICHIGAN AV.

PENSACOLA, FL 32526

## Jan 14, 2008 8:00 am **ANNUAL REPORT Secretary of State DOCUMENT # L02000028353** 01-14-2008 90048 028 \*\*\*138.75 LANÉ AND HATCHER ENGINEERS, LLC Principal Place of Business Mailing Address 60001497 2639-B W. MICHIGAN AVENUE 2639-B W. MICHIGAN AVENUE PENSACOLA, FL 32526 PENSACOLA, FL 32526 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092008 Chg-LLC CR2E083 (12/06) 4. FEI Number Applied For City & State City & State 52-2391690 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6.\_Name and Address of Current Registered Agent LANE, JAMES H Street Address (P.O. Box Number is Not Acceptable) 2639-B W. MICHIGAN AVENUE PENSACOLA, FL 32526 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 Make check payable to After May 1, 2008 Fee will be \$538.75 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. MGRM ☐ Delete TITLE ☐ Change ☐ Addition TITLE LANE, ZACHARY P NAME NAME STREET ADDRESS 2639-B W. MICHIGAN AV. STREET ADDRESS PENSACOLA, FL 32526 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition MOSELEY, CYNTHIA A NAME NAME 2639-B W. MICHIGAN AV. STREET ADDRESS STREET ADDRESS PENSACOLA, FL 32526 CITY-ST-ZIP CITY-ST-ZIP MGRM TITLE Delete TITLE ☐ Change ☐ Addition KILCREASE, JON NAME NAME STREET ADDRESS 2639-B W. MICHIGAN AV. STREET ADDRESS PENSACOLA, FL 32526 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE LANE, JAMES H NAME 2639-B W. MICHIGAN AV. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PENSACOLA, FL 32526 CITY-ST-ZIP ☐ Change Delete Addition TITLE HATCHER, ALAN C NAME NAME

FILED

☐ Change

☐ Addition

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 exegute this report as required by Chapter 608, Florida Statutes.

TITLE

☐ Defete

STREET ADDRESS CITY-ST-7IP

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: G MANAGING MEMBER, MANAGER, OR AUTHOR