


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000029146 1. Entity Name HUMMER K-9, LC	
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Principal Place of Business 367 WEST BLACKJACK BRANCH WAY JACKSONVILLE, FL 32259	Mailing Address 367 WEST BLACKJACK BRANCH WAY JACKSONVILLE, FL 32259
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03072005No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3794920	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

MULLENIX, DONALD G
 367 WEST BLACKJACK BRANCH WAY
 JACKSONVILLE, FL 32259

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____


Filing Fee is \$50.00 Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MULLENIX, DONALD G 367 WEST BLACKJACK BRANCH WAY JACKSONVILLE, FL 32259
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  DONALD G. MULLENIX 04-07-05 904-635-6776

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #