


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90040 035 ****50.00

| | |
|--|---|
| DOCUMENT # L02000030849 1. Entity Name HART SERVICES LLC |  |
|--|---|

| | |
|---|---|
| Principal Place of Business 11607 WINDSOR BAY PLACE WELLINGTON, FL 33467 US | Mailing Address 11607 WINDSOR BAY PLACE WELLINGTON, FL 33467 US |
|---|---|

DO NOT WRITE IN THIS SPACE



01062007 No Chg-LLC

CR2E083 (11/05)

| | |
|---|---------------------------------------|
| 4. FEI Number 61-1432029 | 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 HART, JAY E 11607 WINDSOR BAY PLACE WELLINGTON, FL 33467 |
|--|

**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, 2007**

| 9. MANAGING MEMBERS/MANAGERS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM HART, JAY E 11607 WINDSOR BAY PLACE WELLINGTON, FL 33467 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM HART, LAURA K 11607 WINDSOR BAY PLACE WELLINGTON, FL 33467 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

**DO NOT WRITE
IN THIS SPACE**

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: Jay E Hart Jay E Hart MGRM 4-15-07 561-352-1932
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #