

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 22, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000000308</b>	
1. Entity Name HMI LLC	
1800172000P	
Principal Place of Business JPMORGAN CHASE BANK 3399 PGA BLVD. #100 PALM BEACH GARDENS, FL 33410	Mailing Address JPMORGAN CHASE BANK 3399 PGA BLVD. #100 PALM BEACH GARDENS, FL 33410



03072008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 43-2027336	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**

TIERNAN, PETER B  
JPMORGAN CHASE BANK N.A.  
3399 PGA BLVD STE. 100  
PALM BEACH GARDENS, FL 33410

**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 \_\_\_\_\_ 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**

000000914376  
05/08/08-80053-024 138.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	JPMORGAN CHASE BANK N.A.
STREET ADDRESS	3399 PGA BLVD. STE 100
CITY- ST- ZIP	PALM BEACH GARDENS, FL 33410

TITLE	
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CITY- ST- ZIP	

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CITY- ST- ZIP	

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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:** *[Signature]* *JPMorgan Chase Bank, NA, trustee* *4/14/08 877-884-4453*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #