

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 05, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000002917

1. Entity Name
HAAS PROPERTIES LLC



Principal Place of Business
**C/O BROAD AND CASSEL
ONE NORTH CLEMATIS ST., STE. 500
WEST PALM BEACH, FL 33401**

Mailing Address
**600 KRYSTAL BLDG.
CHATTANOOGA, TN 37402**



01222007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
76-0731010

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PATRICIA LEBOW, P.A.
BROAD AND CASSEL
ONE NORTH CLEMATIS ST., STE. 500
WEST PALM BEACH, FL 33401**

**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 _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	COPE, ANDREW G
STREET ADDRESS	600 KRYSTAL BLDG.
CITY-STATE-ZIP	CHATTANOOGA, TN 37402

TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

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02/12/07-80016-020 50.00

**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: Andrew G. Cope
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/31/07
Date

423 756 1202
Daytime Phone #