# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Jan 13, 2005**
**Secretary of State**

DOCUMENT# L03000009090

**Entity Name:** J.W. HANSON ENTERPRISES, LLC

**Current Principal Place of Business:**

4503 IRVINGTON AVE SUITE 1
JACKSONVILLE, FL 32210 US

**New Principal Place of Business:**

4503 IRVINGTON AVE SUITE 4
JACKSONVILLE, FL 32210 US

**Current Mailing Address:**

4529 LAWNVIEW ST
JACKSONVILLE, FL 32205 US

**New Mailing Address:**

**FEI Number: 90-0070384** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HANSON, JOSEPH W MR
4529 LAWNVIEW ST
JACKSONVILLE, FL 32205 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: ______________________________

Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete
Name: HANSON, JOSEPH W MR
Address: 4529 LAWNVIEW ST
City-St-Zip: JAX, FL 32205 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JOSEPH HANSON MR 01/13/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date