## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L03000030451**

HAMLIN TERRACE FOUNDATION, LLC



**FILED** Apr 06, 2007 08:00 Al Secretary of State

Principal Place of Business

625 WALTHAM AVE ORLANDO, FL 32809 Mailing Address

**625 WALTHAM AVE** ORLANDO, FL 32809



01032007 No Chg-LLC

CR2E083 (11/05)

Fee Required

16-1680018 Not	Applicable
4. FEI Number App	olied For

6. Name and Address of Current Registered Agent

LILLIAN MANAGEMENT GROUP, INC 625 WALTHAM AVE ORLANDO, FL 32809

## DO NOT WRITE IN THIS SPACE

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8. The above the obligat	named entity submits this statement for the purpose of changing of registered agent	ging its registere	d office or registered agent, or both, i	n the State of Florida. I am familiar with, and accept	
		(NOTE, Registered	Agent signature required when reinstating}	DATE	
	iling Fee is \$50.00 ue by May 1, 2007		. 0	U00000694378 4/17/07-80016-019 50.00	
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREE1 ADDRESS CITY-ST-ZIP	MGR DIMINO, JOSEPH M 1050 RIVERSIDE DR, SUITE 101A PALMETTO, FL 34221				
NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STRELT ADDRESS CITY-ST-ZIP		·	DO N	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-SY-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE