

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 09, 2008 8:00 am
Secretary of State

03-18-2008 90173 016 ***138.75

DOCUMENT # L03000033109 1. Entity Name HMT OLDSMAR, LLC					
Principal Place of Business 304 GIVENS ST. SARASOTA, FL 34242 US			Mailing Address 304 GIVENS ST. SARASOTA, FL 34242 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-0193699	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent SILBERSTEIN, DAVID M 50 CENTRAL AVENUE, SUITE 700 THE PLAZA BUILDING SARASOTA, FL 34236			7. Name and Address of New Registered Agent Name HENRY TAPLINGER Street Address (P.O. Box Number is Not Acceptable) 304 GIVENS STREET City SARASOTA FL Zip Code 34242		
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 <i>Henry Taplenger</i> <small>Signature, typed or printed name of registered agent and title if applicable</small>			DATE 3/5/08 <small>(NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR TAPLINGER, HENRY M 304 GIVENS ST. SARASOTA, FL 34242 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 118, 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 606, Florida Statutes.					
SIGNATURE: <i>Henry Taplenger</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			DATE 4/8/08 (941) 346-3802 <small>Date Daytime Phone #</small>		

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ATTACHMENT

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Division of Corporations

Annual Report

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Document Number L03000033109
Business Entity Name HMT'OLDSMAR, LLC
FEI Number 200193699
FEI Number Status
Certificate of Status Desired No

Principal Place of Business

Address 304 GIVENS ST.
Suite, Apt. #, etc.
City, State SARASOTA, FL
Zip Code & Country 34242 US

Mailing Address

Address 304 GIVENS ST.
Suite, Apt. #, etc.
City, State SARASOTA, FL
Zip Code & Country 34242 US

Name and Address of Registered Agent

Name (Last, First, Middle, Title) SILBERSTEIN, DAVID, M
Address 50 CENTRAL AVENUE, SUITE 700
Suite, Apt. #, etc. THE PLAZA BUILDING
City, State SARASOTA, FL
Zip Code & Country 34236 US
Registered Agent Signature DAVID M. SILBERSTEIN

HENRY TAPLINGER
304 GIVENS STREET
SARASOTA FL 34242
Henry Taplinger

Managing Member/Manager Name and Address

Title MGR
Name (Last, First, Middle, Title) TAPLINGER, HENRY, M
Street Address 304 GIVENS ST.
City, State SARASOTA, FL
Zip Code & Country 34242 US

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Title

MGR

L0300033109

Managing Member/Manager Signature HENRY M. TAPLINGER

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- OR -

Entity Name to serve as MGR or
MGRM

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as MGR or
MGRM

Street Address

City, State

Zip Code & Country

Title

Name (Last, First, Middle, Title)

- OR -

Entity Name to serve as MGR or
MGRM

Street Address

City, State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named
above must type their name in the 'Managing Member/Manager Signature' block
below. A business entity name is not allowed in this block.

Title

MGR

Managing Member/Manager Signature: HENRY M. TAPLINGER

The individual "signing" this document affirms that the facts stated herein are true.

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