

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 29, 2005 8:00 am**  
**Secretary of State**

04-29-2005 90036 011 \*\*\*\*50.00

**DOCUMENT # L03000037429**

1. Entity Name  
HH MAIN STREET, LLC



Principal Place of Business

424 S. MAIN ST.  
SUFFOLK, VA 23434

Mailing Address

1485 SE ST. LUCIE BLVD  
STUART, FL 34-9965

**DO NOT WRITE IN THIS SPACE**



04272005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
54-2127605

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

HOFFLER, OSWALD W JR.  
1485 SE ST. LUCIE BLVD  
STUART, FL 34996

**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

*Oswald W Hoffler*

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

(NOTE: Registered Agent signature required when reinstating)

*April 27, 2005*

DATE

**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST- ZIP  
MGRM  
HOFFLER, OSWALD W JR  
1485 SE ST. LUCIE BLVD  
STUART, FL 34996

TITLE  
NAME  
STREET ADDRESS  
CITY-ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST- ZIP

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STREET ADDRESS  
CITY-ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST- ZIP

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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:

*Oswald W Hoffler*

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

*April 27, 2005* *172-283-8355*

Date

Daytime Phone #