2004 LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT # L03000040136

FILED May 04, 2004 8:00 am Secretary of State

1. Entity Name HIDDEN COVE, L.L.C.				05-04-200	04 90016 039 ****55.00
Principal Place of Business 1600 MARTIN LUTHER KING STREET SOUTH ST. PETERSBURG, FL 33701 Mailing Address 1600 MARTIN LUTHER K ST. PETERSBURG, FL 33				NOW! BOTH BUT BUT WAR I'MS SHEEK IN 1885	
3880 34th Avenue S. 4905 34		3. Mailing Address 4905 34th Str	eet South		
Suite, Apt. #, etc. Suite D		Suite, Apt. #, etc. # 270		04242004 Chg-LLC	CR2E083 (10/03)
St. Petersburg, FL		St. Petersburg, FL		4. FEI Number	Applied For Not Applicable
Zip 33711	Country	Zip 337//	Country U.5	5. Certificate of Status Desired	\$5.00 Additional
23/1/	6. Name and Address of Current	1 1 1		7. Name and Address of New	<u> </u>
GRACELINE PROGRESSIVE LAND DEVELOPERS, LLC Della Hatch - Abdullah					
2121 BARCELONA ST. PETERSBURG, FL 33712				ress (P.O. Box Number is Not Acceptal	ile) A:
					Ste. 5 W
St. Petershura FL 337/3					
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 While Hard Mobile Della Hatch-Abdullah 4/34/04 Signisture typed or printed name of registered agent and the it applicable. (NOTE: Registored Agent signature required when reinstating) DATE					
					ake check payable to da Department of State
9.	MANAGING MEMBE	- 	TITLE N	140	S/CHANGES
NAME	GRACELINE PROGRESSIVE LA	MD DEVELOPERS LLC	NAME A	Jodullah, M. Taalib 121 Barcelona Ways.	Change Addition
STREET ADDRESS City-St-Zip				121 Barcelona Way. t. Petersburg, FL 337	בנו
TITLE	MGRM	⊠ Delete		0.000	
NAME STREET ADDRESS	ST. PETERSBURG NEIGHBORHOOD HOUSING SERVIC		NAME ATTREET ADDRESS 3	hmad, Gasim 1880 34th Avenue 5 # 1	ē.
CITY-ST-ZIP	ST. PETERSBURG, FL 33701	KLLI 300 III		1. Petersburg, FL 33-	
TITLE NAME		☐ Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		antinoppe -	STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
NAME		☐ Delete	name		Change Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		
TITLE		Delete	TITLE	- y- <u> </u>	☐ Change ☐ Addition
NAME STREET ADDRESS			NAME Street Address		·
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	u .	☐ Delete	TITLE		☐ Change ☐ Addition
STREET ADDRESS			NAME Street address		
	Explanation to	•	CITY-ST-ZIP		
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 receiptr or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
I was a sure of the sure of th					
SIGNATURE: / M.T. Abdullah 4/21/19 127-867-1705					
l	SIGNATURE AND TYPED OR PRINTED HAME OF	F SIGNONG MANAGING MEMBER, MANA	GER, OR AUTHORIZED RE	PRESENTATIVE Date	Daytime Phone #