

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042304

FILED
Mar 22, 2008
Secretary of State

Entity Name: HHS, LLC

Current Principal Place of Business:

431 WESTERN AVE
TOLEDO, OH 43609 US

New Principal Place of Business:

Current Mailing Address:

431 WESTERN AVE
TOLEDO, OH 43609 US

New Mailing Address:

FEI Number: 83-0374622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAREY, JAMES A JR.
1272-B TIMBERLANE RD
TALLAHASSEE, FL 32312 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/MANAGERS:

Title: MGRM () Delete
Name: HICKEY, DONALD K
Address: 431 WESTERN AVE
City-St-Zip: TOLEDO, OH 43609 US

Title: MGRM () Delete
Name: HICKEY, JANET A
Address: 431 WESTERN AVE
City-St-Zip: TOLEDO, OH 43609 US

Title: MGRM () Delete
Name: HUFFMAN, RANDY L
Address: 9160 NW 13TH STREET
City-St-Zip: PLANTATION, FL 33322 US

Title: MGRM () Delete
Name: HUFFMAN, CAROL S
Address: 9160 NW 13TH STREET
City-St-Zip: PLANTATION, FL 33322 US

Title: MGRM () Delete
Name: SMITH, STEVEN R
Address: 523 CAMBRIDGE PARK SOUTH
City-St-Zip: MAUMEE, OH 43537 US

Title: MGRM () Delete
Name: SMITH, LINDA E
Address: 523 CAMBRIDGE PARK SOUTH
City-St-Zip: MAUMEE, OH 43537 US

ADDITIONS/CHANGES:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: STEVEN R SMITH

MGRM

03/22/2008

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