

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000046766

Entity Name: HATCHWAY, LLC

FILED  
Apr 03, 2009  
Secretary of State

## Current Principal Place of Business:

10625 1ST STREET EAST  
STE 205  
TREASURE ISLAND, FL 33706 US

## New Principal Place of Business:

16312 3RD STREET EAST  
REDINGTON BEACH, FL 33708 US

## Current Mailing Address:

10625 1ST STREET EAST  
STE 205  
TREASURE ISLAND, FL 33706 US

## New Mailing Address:

16312 3RD STREET EAST  
REDINGTON BEACH, FL 33708 US

FEI Number: 20-0415139

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HAINES, PETER B MR  
10625 1ST STREET EAST  
STE 205  
TREASURE ISLAND, FL 33706 US

## Name and Address of New Registered Agent:

HAINES, PETER B MR  
16312 3RD STREET EAST  
REDINGTON BEACH, FL 33708 US

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:

04/03/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: HAINES, PETER  
Address: 10625 1ST STREET EAST  
City-St-Zip: TREASURE ISLAND, FL 33706 US

Title: MGRM ( ) Delete  
Name: HAINES, SHERYL  
Address: 10625 1ST STREET EAST  
City-St-Zip: TREASURE ISLAND, FL 33706 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: HAINES, PETER  
Address: 16312 3RD STREET EAST  
City-St-Zip: REDINGTON BEACH, FL 33708 US

Title: MGRM (X) Change ( ) Addition  
Name: HAINES, SHERYL  
Address: 16312 3RD STREET EAST  
City-St-Zip: REDINGTON BEACH, FL 33708 US

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: PETER HAINES

MGRM

04/03/2009

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