2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000051737

1. Entity Name

MARK HAMMAC FLOORING, L.L.C.



FILED
Apr 30, 2008 08:00 AM
Secretary of State

Principal Place of Business

5409 TOMLINSON RD PENSACOLA, FL 32526 Mailing Address

5409 TOMLINSON RD PENSACOLA, FL 32526



01112008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number	 Applied For	
80-0083329	 Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HAMMAC, CORA J 5409 TOMLINSON RD PENSACOLA, FL 32526

DO NOT WRITE IN THIS SPACE

me obligations of registered agent.						
SIGNATURE_	Signature, typed or printed name of registered agont and (itle it applicable	(NOTE: Registered Agant signature required when reinstating)	DATE			
	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.75					
9.	MANAGING MEMBERS/MANAGERS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HAMMAC, MARK W 5409 TOMLINSON RD PENSACOLA, FL 32526					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			03, 23, 03, 03,000, 010, 1301,10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS						

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

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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.

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Mark Mammac

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1-28-08

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Date

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