

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000000783

1. Entity Name
THE H & L GROUP, LLC



Principal Place of Business
**29243 BIRDS EYE DRIVE
WESLEY CHAPEL, FL 33543**

Mailing Address
**29243 BIRDS EYE DRIVE
WESLEY CHAPEL, FL 33543**



03182006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-0575528

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

8. Name and Address of Current Registered Agent

**NORMAN, CHRISTOPHER H
315 SOUTH HYDE PARK AVENUE
TAMPA, FL 33606**

**DO NOT WRITE
IN THIS SPACE**

9. 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 _____

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

(NOTE: Registered Agent signature required when relating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

1100000464859
03/22/06-80012-018 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
LONG, DEBORAH S
29243 BIRDS EYE DRIVE
WESLEY CHAPEL, FL 33543**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

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IN THIS SPACE**

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.

SIGNATURE: _____

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

3/17/06 (813)498-4462
Date Daytime Phone #