

DOCUMENT# L04000002383

Entity Name: HOPPES & ASSOCIATES, LLC

Current Principal Place of Business:

16029 GLEN HAVEN DR
TAMPA, FL 33618

New Principal Place of Business:**Current Mailing Address:**

16029 GLEN HAVEN DR
TAMPA, FL 33618

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOPPE, TIMOTHY G
16029 GLEN HAVEN DR
TAMPA, FL 33618 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: TIMOTHY G. HOPPES

Electronic Signature of Registered Agent

Date _____

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HOPPE, TIMOTHY G MGR
Address: 16029 GLEN HAVEN DRIVE
City-St-Zip: TAMPA, FL 33618 US

ADDITIONS/CHANGES:

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

Title: MGR () Delete
Name: HOPPES, PATRICIA C
Address: 16029 GLEN HAVEN DR.
City-St-Zip: TAMPA, FL 33618 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: TIMOTHY G. HOPPE

MGR

10/11/2006

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