2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# L04000005570

Entity Name: HIAWATHA PROPERTIES, L.L.C.

Current Principal Place of Business:	**New Principal Place of Business:**
515 A EVERGREEN ST. PANAMA CITY BEACH, FL 32407	

Current Mailing Address:	**New Mailing Address:**
515 A EVERGREEN ST. PANAMA CITY BEACH, FL 32407	

FEI Number: 20-0759563   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
KEHL, BRIAN J 22818 ANN MILLER RD PANAMA CITY BEACH, FL 32413 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: _____

Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title: MGR ( ) Delete Name: KEHL, BRIAN J Address: 22818 ANN MILLER RD City-St-Zip: PANAMA CITY BEACH, FL 32413	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: MGRM ( ) Delete Name: KEHL, STACY L Address: 22818 ANN MILLER RD City-St-Zip: PANAMA CITY BEACH, FL 32413	Title: MGRM (X) Change ( ) Addition Name: EAMES, REDA K Address: 206 WISTERIA ST. City-St-Zip: PANAMA CITY BEACH, FL 32407
Title: ( ) Delete Name: Address: City-St-Zip:	Title: MGRM ( ) Change (X) Addition Name: WEBSTER, THOMAS Address: 3610 PINETOP RD City-St-Zip: GREENSBORO, NC 27410

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: BRIAN J. KEHL   MGR   04/26/2006

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