2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# L04000038678

Entity Name: HYPERION CONSTRUCTION, L.L.C.

Current Principal Place of Business:

226 SOUTH PALAFOX PLACE
SUITE 401 B-C
PENSACOLA, FL 32502

New Principal Place of Business:

Current Mailing Address:

226 SOUTH PALAFOX PLACE
SUITE 401 B-C
PENSACOLA, FL 32502

New Mailing Address:

FEI Number: 20-1302617 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CHASTAIN, MARK A
226 SOUTH PALAFOX ST
STE 401 B & C
PENSACOLA, FL 32502 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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	CHASTAIN, MARK A	
Address:	226 SOUTH PALAFOX PLACE, SUITES 401 B & C	
City-St-Zip:	PENSACOLA, FL 32501	
Title:	MGRM	( ) Delete
Name:	HARRELSON, GREGORY L	
Address:	15359 FLEMMING ROAD	
City-St-Zip:	BAY MINETTE, AL 36507	
Title:	MGRM	( ) Delete
Name:	HARRELSON, HARRELL L	
Address:	15375 FLEMMING ROAD	
City-St-Zip:	BAY MINETTE, AL 36507	

ADDITIONS/CHANGES:

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

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: MARKC@HYPERIONCC.COM MGRM 01/20/2009

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