# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 18, 2007**
**Secretary of State**

DOCUMENT# L04000040596

**Entity Name:** HESSEY AVENUE LLC

**Current Principal Place of Business:**

3695 LAURENS AVE.
VALKARIA, FL 32950

**New Principal Place of Business:**

3695 LAURENS AVE.
VALKARIA, FL 329504132

**Current Mailing Address:**

PO BOX 501170
MALABAR, FL 329501170

**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:**

BENNETT, SANDRA D
3695 LAURENS AVE.
VALKARIA, FL 32950 US

**Name and Address of New Registered Agent:**

BENNETT, SANDRA D
3695 LAURENS AVE.
VALKARIA, FL 329504132 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: SANDRA D. BENNETT 04/18/2007
Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete
Name: PROVIDER RESOURCES L, LC
Address: PO BOX 501170
City-St-Zip: MALABAR, FL 329501170

**ADDITIONS/CHANGES:**

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: SANDRA D. BENNETT MGRM 04/18/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date