

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000048532

Entity Name: HDM CO-NW16 LLC

**FILED**  
**Jan 05, 2005**  
**Secretary of State**

**Current Principal Place of Business:**

15797 SW 20TH STREET  
DAVIE, FL 333265041

**New Principal Place of Business:**

7143 NW 123 AVENUE  
PARKLAND, FL 33076

**Current Mailing Address:**

15797 SW 20TH STREET  
DAVIE, FL 333265041

**New Mailing Address:**

P.O. BOX 267257  
WESTON, FL 33326

FEI Number: 02-0725390

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DOYLES-MARTIN, HOPE  
15797 SW 20TH STREET  
DAVIE, FL 333265041 US

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

DOYLES-MARTIN, HOPE  
7143 NW 123 AVENUE  
PARKLAND, FL 33076 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: HOPE DOYLES-MARTIN

01/05/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: DOYLES-MARTIN, HOPE  
Address: 15797 SW 20TH STREET  
City-St-Zip: DAVIE, FL 333265041

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DOYLES-MARTIN, HOPE  
Address: 7143 NW 123 AVENUE  
City-St-Zip: PARKLAND, FL 33076

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: HOPE DOYLES-MARTIN

MGMR

01/05/2005

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