

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 31, 2007 8:00 am**  
**Secretary of State**

01-31-2007 90084 038 \*\*\*\*50.00

**DOCUMENT # L04000053128**

**1. Entity Name**  
**HAMMET FAMILY LLC**



**Principal Place of Business**  
**3797 INDIAN TRAIL**  
**DESTIN, FL 32541**

**Mailing Address**  
**3797 INDIAN TRAIL**  
**DESTIN, FL 32541**

**2. Principal Place of Business - No P.O. Box #**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01272007 Chg-LLC CR2E083 (12/06)

**4. FEI Number**  
**20-1391969**

Applied For  
Not Applicable

**5. Certificate of Status Desired** ☐ **\$5.00 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**WELCH, STEVEN T**  
**36468 EMERALD COAST PKY**  
**STE 2201**  
**DESTIN, FL 32541**

**7. Name and Address of New Registered Agent**

Name **Ben H Hammet Jr**

Street Address (P.O. Box Number is Not Acceptable)

**3797 Indian Trail**

City **Destin**

FL Zip Code **32541**

**8. 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. I am familiar with, and accept the obligations of registered agent.**

SIGNATURE Ben Hay Hammet Jr Ben Hay Hammet Jr 1-27-07  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00**  
**Due by May 1, 2007**

**Make check payable to**  
**Florida Department of State**

**9. MANAGING MEMBERS/MANAGERS**

TITLE **MGR** ☐ Delete  
NAME **HAMMET MANAGEMENT LLC**  
STREET ADDRESS **3797 INDIAN TRAIL**  
CITY-ST-ZIP **DESTIN, FL 32541**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**10. ADDITIONS/CHANGES**

TITLE **MGRM** ☒ Change ☐ Addition  
NAME **Hammet Management LLC**  
STREET ADDRESS **3797 Indian Trail**  
CITY-ST-ZIP **Destin, FL 32541**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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STREET ADDRESS  
CITY-ST-ZIP

**11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Ben Hay Hammet Jr Ben Hay Hammet Jr 1-27-07 850-837-8301  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #