

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000061918

Entity Name: HTM 1, LLC

FILED
Jan 23, 2005
Secretary of State

Current Principal Place of Business:

291 MOYTOY ROAD, #105
CRAB ORCHID, TN 37723

New Principal Place of Business:

291 MOYTOY ROAD, #105
CRAB ORCHARD, TN 37723

Current Mailing Address:

291 MOYTOY ROAD, #105
CRAB ORCHID, TN 37723

New Mailing Address:

291 MOYTOY ROAD, #105
CRAB ORCHARD, TN 37723

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, LISA N ESQ.
C/O COLLINS, BROWN, ET AL
756 BEACHLAND BLVD.
VERO BEACH, FL 32963 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/MEMBERS:

Title: MGRM () Delete
Name: MORGAN, THOMAS A
Address: 291 MOYTOY ROAD, #105
City-St-Zip: CRAB ORCHID, TN 37723

Title: MGRM () Delete
Name: MORGAN, DARA L
Address: 291 MOYTOY ROAD, #105
City-St-Zip: CRAB ORCHID, TN 37723

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MORGAN, THOMAS A
Address: 291 MOYTOY ROAD, #105
City-St-Zip: CRAB ORCHARD, TN 37723

Title: MGRM (X) Change () Addition
Name: MORGAN, DARA L
Address: 291 MOYTOY ROAD, #105
City-St-Zip: CRAB ORCHARD, TN 37723

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: DARA LYNN MORGAN

MGRM

01/23/2005

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