

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065081

Entity Name: HANSON & NIPE, LLC

FILED  
Apr 16, 2009  
Secretary of State

**Current Principal Place of Business:**

25715 S.R. 46  
SORRENTO, FL 32776

**New Principal Place of Business:**

**Current Mailing Address:**

25715 S.R. 46  
SORRENTO, FL 32776

**New Mailing Address:**

FEI Number: 61-1477181

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CLEMENT, G. EDWARD  
308 EAST FIFTH AVENUE  
MT. DORA, FL 32757 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: MGR ( ) Delete  
Name: HANSON, CATHERINE C  
Address: 25715 S.R. 46  
City-St-Zip: SORRENTO, FL 32776

Title: MGR ( ) Delete  
Name: NIPE, FRANCES C  
Address: 5800 S.W. 37TH AVENUE  
City-St-Zip: FT. LAUDERDALE, FL 33312

**ADDITIONS/CHANGES:**

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: CATHERINE C. HANSON

MGR

04/16/2009

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