2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 28, 2007
Secretary of State

DOCUMENT# L04000070375

Entity Name: HURRICANE BUDDY, LLC

Current Principal Place of Business:

1200 SOUTH ALHAMBRA CIRCLE
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

1200 SOUTH ALHAMBRA CIRCLE
NAPLES, FL 34103

New Mailing Address:

FEI Number: 42-1645400 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SEDGEWICK, KELLY
1200 SOUTH ALHAMBRA CIRCLE
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

SEDGEWICK, KELLY J
1200 SOUTH ALHAMBRA CIRCLE
NAPLES, FL 34103 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: KELLY J SEDGEWICK 03/28/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	SEDGEWICK, KELLY	
Address:	1200 SOUTH ALHAMBRA CIRCLE	
City-St-Zip:	NAPLES, FL 34103	
Title:	MGRM	( ) Delete
Name:	DESTOUT, MELANIE	
Address:	612 S.E. 27TH STREET	
City-St-Zip:	CAPE CORAL, FL 33904	
Title:	MGRM	(X) Delete
Name:	SEDGEWICK, RICHARD	
Address:	1200 SOUTH ALHAMBRA CIRCLE	
City-St-Zip:	NAPLES, FL 34103	
Title:	MGRM	(X) Delete
Name:	DESTOUT, BRIAN	
Address:	612 S.E. 27TH STREET	
City-St-Zip:	CAPE CORAL, FL 33904	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: KELLY J SEDGEWICK PRES 03/28/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date