

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000085230

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: HICKEY ENTERPRISES, LLC

**Current Principal Place of Business:**

423 VALKARIA ROAD  
PALM BAY, FL 32909 US

**New Principal Place of Business:**

**Current Mailing Address:**

4420 SCOTTS RIDGE ROAD  
RAYWICK, KY 40060

**New Mailing Address:**

FEI Number: 20-1921190

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WHITNABLE, JUDY  
1200 HERITAGE ACRES BLVD  
ROCKLEDGE, FL 32955 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: MGRM ( ) Delete  
Name: HICKEY, MICHAEL F  
Address: 423 VALKARIA ROAD  
City-St-Zip: PALM BAY, FL 32909 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Change (X) Addition  
Name: DORTON BOYD, PATRICIA E  
Address: 23111 LYLE LANE  
City-St-Zip: BRISTOL, VA 24202 US

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: PATRICIA DORTON BOYD

MGRM

04/29/2009

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