2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# L05000007041

Entity Name: H&A MANAGEMENT, LLC

Current Principal Place of Business:

P.O. BOX 220
PAHOKEE, FL 33476

New Principal Place of Business:

135 BACOM POINT RD
2ND FLOOR
PAHOKEE, FL 33476

Current Mailing Address:

P.O. BOX 220
PAHOKEE, FL 33476

New Mailing Address:

FEI Number: 43-2075685 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOWICKI, MARK J
480 MAPLEWOOD DRIVE, SUITE 2
JUPITER, FL 33476 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: HATTON, ROGER C
Address: 2727 BACOM POINT ROAD
City-St-Zip: PAHOKEE, FL 33476

Title: MGRM ( ) Delete
Name: ALLEN, PAUL
Address: 33 NE AVENUE I
City-St-Zip: BELLE GLADE, FL 33430

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: PAUL ALLEN VSD 04/20/2009

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