## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000012487

Entity Name: HCH2 LLC

Address:

City-St-Zip:

TALLAHASSEE, FL 32304

FILED Apr 14, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1716 BELLEVUE, UNIT 2 TALLAHASSEE, FL 32304 **Current Mailing Address: New Mailing Address:** P.O. BOX 20438 TALLAHASSEE, FL 32316 FEI Number: 43-2074603 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LAND, HENRY 1716 BELLEVUE UNIT 2 TALLAHASSEE, FL 32304 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete LAND, HENRY Name: Name: Address: 1716 BELLEVUE Address: City-St-Zip: TALLAHASSEE, FL 32304 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: CLEMENTS, CRISTIAN Name: Address: 2603 THARPE ST. UNIT D Address: City-St-Zip: TALLAHASSEE, FL 32304 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BROWN, HENRY Name: Name: 1606 OVERSTREET

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.

Address:

City-St-Zip:

SIGNATURE: HENRY LAND **MGRM** 04/14/2009