2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2006
Secretary of State

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Entity Name: HH PROPERTIES, LLC

Current Principal Place of Business:

6266 DUPONT STATION COURT
JACKSONVILLE, FL 32217

New Principal Place of Business:

6266 DUPONT STATION COURT
JACKSONVILLE, FL 322172567 US

Current Mailing Address:

6266 DUPONT STATION COURT
JACKSONVILLE, FL 32217

New Mailing Address:

6266 DUPONT STATION COURT
JACKSONVILLE, FL 322172567 US

FEI Number: 20-2425831 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

VANESSA, HERBERT M
6266 DUPONT STATION COURT
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

VANESSA, HERBERT M MGRM
6266 DUPONT STATION COURT
JACKSONVILLE, FL 322172567 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: VANESSA M HERBERT 04/20/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: LYONS, CONNIE
Address: 6266 DUPONT STATION COURT
City-St-Zip: JACKSONVILLE, FL 32217 US

Title: MGRM ( ) Delete
Name: HUMPHRIES, RALPH J
Address: 6266 DUPONT STATION COURT
City-St-Zip: JACKSONVILLE, FL 32217 US

Title: MGRM ( ) Delete
Name: HERBERT, VANESSA M
Address: 6266 DUPONT STATION COURT
City-St-Zip: JACKSONVILLE, FL 32217 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: LYONS, CONNIE A MGR
Address: 6266 DUPONT STATION COURT
City-St-Zip: JACKSONVILLE, FL 322172567 US

Title: MGRM (X) Change ( ) Addition
Name: HUMPHRIES, RALPH J MGRM
Address: 6266 DUPONT STATION COURT
City-St-Zip: JACKSONVILLE, FL 322172567 US

Title: MGRM (X) Change ( ) Addition
Name: HERBERT, VANESSA M MGRM
Address: 6266 DUPONT STATION COURT
City-St-Zip: JACKSONVILLE, FL 322172567 US

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: CONNIE A LYONS MGR 04/20/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date