2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 03, 2008
Secretary of State

DOCUMENT# L05000022984

Entity Name: HERNANDO 195, L.L.C.

Current Principal Place of Business:

2764 SUNSET POINT ROAD
SUITE 200
CLEARWATER, FL 33759

New Principal Place of Business:

Current Mailing Address:

2764 SUNSET POINT ROAD
SUITE 200
CLEARWATER, FL 33759

New Mailing Address:

FEI Number: 20-2471830 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DONNA J. FELDMAN, P.A.
19321-C US HIGHWAY 19 NORTH
SUITE 103
CLEARWATER, FL 33764 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:	MGR	( ) Delete
Name:	BABCOCK, CHARLES I III	
Address:	2764 SUNSET POINT ROAD, SUITE 200	
City-St-Zip:	CLEARWATER, FL 33759	
Title:	MGR	( ) Delete
Name:	BABCOCK, CHRISTOPHER H	
Address:	2764 SUNSET POINT ROAD, SUITE 200	
City-St-Zip:	CLEARWATER, FL 33759	
Title:	MGR	( ) Delete
Name:	KASPER, JAMES H	
Address:	2764 SUNSET POINT ROAD, SUITE 200	
City-St-Zip:	CLEARWATER, FL 33759	

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:	

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: KOREEN WIGGS OM 01/03/2008

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