

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000027275

Entity Name: 514 HANOVER LANE, LLC

**FILED**  
**Feb 25, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

C/O M. ASNER, ARNOLD & PORTER LLP  
399 PARK AVENUE  
NEW YORK, NY 10022

**New Principal Place of Business:**

**Current Mailing Address:**

C/O M. ASNER, ARNOLD & PORTER LLP  
399 PARK AVENUE  
NEW YORK, NY 10022

**New Mailing Address:**

FEI Number: 11-3757671

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FISHER, J.MARK  
148 MIRACLE STRIP PKWY, SE, STE. 2  
FT. WALTON BEACH, FL 32548 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  
Name: ASNER, MARCUS A  
Address: C/O ARNOLD & PORTER LLP, 399 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10022

Title: MGRM  
Name: ASNER, KIMBERLY K  
Address: 900 S. SKYLINE DRIVE  
City-St-Zip: CARBONDALE, IL 62901

I hereby 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: MARCUS A. ASNER

MGR

02/25/2011

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