2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035802

Entity Name: AIR HAGEN, LLC

FILED Mar 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

950 SOUTH WINTER PARK DRIVE 130 REMINGTON DRIVE SUITE 350 SUITE 1012

CASSELBERRY, FL 32707 OVIEDO, FL 32765

Current Mailing Address: New Mailing Address:

950 SOUTH WINTER PARK DRIVE 130 REMINGTON DRIVE SUITE 350 **SUITE 1012**

CASSELBERRY, FL 32707 OVIEDO, FL 32765 US

FEI Number: 20-2658683 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:

DEBORAH D HAGEN HAGEN, DEBORAH D 950 S. WINTER PARK DRIVE 130 REMINGTON DRIVE SUITE 350 SUITE 1012 CASSELBERRY, FL 32707 US OVIEDO, FL 32765 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: DEBORAH D. HAGEN 03/16/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM MGR () Delete (X) Change () Addition HAGEN, TERRY D Name: HAGEN TERRY D Name:

950 SOUTH WINTER PARK DRIVE, SUITE 350 Address: 130 REMINGTON DRIVE - SUITE 1012 Address:

City-St-Zip: CASSELBERRY, FL 32707 US City-St-Zip: OVIEDO, FL 32765 US

Title: MGR () Delete Title: MGRM (X) Change () Addition HAGEN, DEBORAH D Name: HAGEN, DEBORAH D Name:

Address: 950 S WINTER PARK DR. STE 350 Address: 130 REMINGTON DRIVE - SUITE 1012

City-St-Zip: OVIEDO, FL 32765

CASSELBERRY, FL 32707 City-St-Zip:

Title: () Delete Title: MGRM () Change (X) Addition **BURGESS CHAMBERS & A, SSOCIATES** Name: Name:

Address: Address: 601 NORTH NEW YORK AVENUE

City-St-Zip: City-St-Zip: WINTER PARK, FL 32789

Title: () Delete Title: MGRM () Change (X) Addition Name: Name: BURDETTE BECKMAN, IN, C. Address: Address: 5851 JACKSON STREET

City-St-Zip: City-St-Zip: HOLLYWOOD, FL 33021

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: DEBORAH D. HAGEN **MGRM** 03/16/2009