2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 28, 2007 08:00 AM Secretary of State DOCUMENT # L05000062793 1. Entity Name HANNAH BEACH, LLC Principal Place of Business Mailing Address 308 FOSTER COVE 308 FOSTER COVE CHULUOTA, FL 32766 CHULUOTA, FL 32766 01152007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-3048424 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROBERTS, JESSE P JR. DO NOT WRITE 308 FOSTER COVE CHULUOTA, FL 32766 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 U00000652204 9. MANAGING MEMBERS/MANAGERS TITLE MGR NAME ROBERTS, JESSE P JR. STREET ADDRESS 308 FOSTER COVE CITY-ST-ZIP CHULUOTA, FL 32766 TITLE NAME STREET ADDRESS City-St-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 4

NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

JRE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-23-07 407-365-3394

te

Daytime Phone #