

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000073901

FILED
Jan 24, 2007
Secretary of State

Entity Name: BONKOWSKI-HENSIEN LLC

Current Principal Place of Business:

17105 SAN CARLOS BLVD., SUITE A6-114
FORT MYERS BEACH, FL 33931

New Principal Place of Business:

17264 SAN CARLOS BLVD.
#302-114
FORT MYERS BEACH, FL 33931

Current Mailing Address:

17105 SAN CARLOS BLVD., SUITE A6-114
FORT MYERS BEACH, FL 33931

New Mailing Address:

17264 SAN CARLOS BLVD.
#302-114
FORT MYERS BEACH, FL 33931

FEI Number: 20-3608426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BONKOWSKI, ED
17105 SAN CARLOS BLVD., SUITE A6-114
FORT MYERS BEACH, FL 33931 US

Name and Address of New Registered Agent:

BONKOWSKI, ED
17264 SAN CARLOS BLVD.
#302-114
FORT MYERS BEACH, FL 33931 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: ED BONKOWSKI

01/24/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BONKOWSKI, ED
Address: 17105 SAN CARLOS BLVD., SUITE A6-114
City-St-Zip: FORT MYERS BEACH, FL 33931

ADDITIONS/CHANGES:

Title: MM (X) Change () Addition
Name: BONKOWSKI, ED
Address: 17264 SAN CARLOS BLVD. #302-114
City-St-Zip: FORT MYERS BCH, FL 33931

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: ED BONKOWSKI

MM

01/24/2007

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