## **2006 LIMITED LIABILITY COMPANY**

Mailing Address

3. Mailing Address

City & State

Suite, Apt. #, etc.

LONGWOOD, FL 32750

## **ANNUAL REPORT**

## **DOCUMENT # L05000083276**

HSP CONSTRUCTION, LLC

1250 S. HIGHWAY 17-92, SUITE 210

Principal Place of Business

LONGWOOD, FL 32750

2. Principal Place of Business

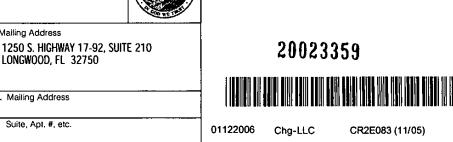
Suite, Apt. #, etc.

City & State



**FILED** Apr 03, 2006 8:00 am Secretary of State

04-03-2006 90061 018 \*\*\*\*50.00



Country Zip Country Zip \$5.00 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent South & Milhausen, P.A. MILLER, SOUTH, MILHAUSEN & CARR, P.A. Street Address (P.O. Box Number is Not Acceptable) C/o Richard D. Baxter, Esq.

C/O RICHARD D. BAXTER, ESQ. 2699 LEE ROAD, SUITE 120 WINTER PARK, FL 32789

1000 Legion Place, Suite 1200

4. FEI Number

20-3355632

City Orlando, 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. uired when reinstating)

Filing Fee is \$50.00

Make check payable to

Applied For Not Applicable

9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES  TITLE MGR Delete TITLE Change  NAME HEIDENESCHER, RICHARD E NAME	☐ Addition
2 50000	Addition
STREET ADDRESS 1250 S. HIGHWAY 17-92, SUITE 210 STREET ADDRESS CITY-ST-ZIP LONGWOOD, FL 32750 CITY-ST-ZIP	
TITLE MGR Delete TITLE Change  NAME SCHURRER, JEFFREY K NAME  STREET ADDRESS 1250 S. HIGHWAY 17-92, SUITE 210 STREET ADDRESS  CITY-ST-ZIP LONGWOOD, FL 32750 CITY-ST-ZIP	Addition
TITLE         Delete         TITLE         Change           NAME         NAME         STREET ADDRESS         STREET ADDRESS           CITY-ST-ZIP         CITY-ST-ZIP         CITY-ST-ZIP	Addition
TITLE         Delete         TITLE         Change           NAME         NAME         NAME           STREET ADDRESS         STREET ADDRESS         CITY-ST-ZIP	Addition
TITLE         Delete         TITLE         Change           NAME         NAME         STREET ADDRESS         STREET ADDRESS           CITY-ST-ZIP         CITY-ST-ZIP         CITY-ST-ZIP	☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  11   Deceby certify that the information supplied with this filling does not quality for the exemptions contained in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further certify that the information in Chanter 119 Florida Statutes 1 further ce	Addition

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.

407-327-0774