

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037376

FILED  
May 02, 2009  
Secretary of State

Entity Name: HAGAR & ASSOCIATES, LLC

**Current Principal Place of Business:**

5617 GREENWAY CIRCLE  
LAKELAND, FL 33805

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 92325  
LAKELAND, FL 33805

**New Mailing Address:**

P.O. BOX 92325  
LAKELAND, FL 33804

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

HAGAR, GWENDOLYN  
5617 GREENWAY CIRCLE  
LAKELAND, FL 33805 US

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

HAGAR, GWENDOLYN L  
5617 GREENWAY CIRCLE  
LAKELAND, FL 33805 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: GWENDOLYN L HAGAR

05/02/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P ( ) Delete  
Name: HAGAR, GWENDOLYN  
Address: 5617 GREENWAY CIRCLE  
City-St-Zip: LAKELAND, FL 33805

**ADDITIONS/CHANGES:**

Title: P (X) Change ( ) Addition  
Name: HAGAR, GWENDOLYN L  
Address: 5617 GREENWAY CIRCLE  
City-St-Zip: LAKELAND, FL 33805

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: GWENDOLYN L HAGAR

PRES

05/02/2009

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