

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000059057

FILED
Aug 19, 2007
Secretary of State

Entity Name: HANBAUM ENTERPRISES, LLC

Current Principal Place of Business:

870 GALAXY LANE
MELBOURNE BEACH, FL 32951

New Principal Place of Business:

140 WARSTEINER WAY
SUITE 803
MELBOURNE BEACH, FL 32951

Current Mailing Address:

870 GALAXY LANE
MELBOURNE BEACH, FL 32951

New Mailing Address:

140 WARSTEINER WAY
SUITE 803
MELBOURNE BEACH, FL 32951

FEI Number: 42-1713997 FEI Number Applied For () FEI Number Not Applicable () 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:

HANBAUM, GARY
870 GALAXY LANE
MELBOURNE BEACH, FL 32951 US

Name and Address of New Registered Agent:

HANBAUM, GARY W MGRM
140 WARSTEINER WAY
SUITE 803
MELBOURNE BEACH, FL 32951 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: GARY W. HANBAUM

08/19/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HANBAUM, GARY
Address: 870 GALAXY LANE
City-St-Zip: MELBOURNE BEACH, FL 32951

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HANBAUM, GARY W MGRM
Address: 140 WARSTEINER WAY, SUITE 803
City-St-Zip: MELBOURNE BEACH, FL 32951

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: GARY W. HANBAUM

MGRM

08/19/2007

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