

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000061115

Entity Name: HPV ENTERPRISE, LLC

FILED
Jun 04, 2009
Secretary of State

Current Principal Place of Business:

2888 MAJESTIC ISLE DR
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

220 CLARKSON ROAD
ELLISVILLE, MO 63011

New Mailing Address:

FEI Number: 20-8511332 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:

HARI, NAVNIT
2888 MAJESTIC ISLE DR
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HARI, NAVNIT
Address: 2888 MAJESTIC ISLE DR
City-St-Zip: CLERMONT, FL 34711

Title: MGR () Delete
Name: VASHEE, ACKSHAY
Address: 150 SUN & SAND ROAD
City-St-Zip: SPARTUNBURG, SC 29303

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NAVIT HARI

PRES

06/04/2009

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