

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000066191

FILED
Feb 11, 2008
Secretary of State

Entity Name: HIGHLANDS HURRICANE PROTECTION, LLC

Current Principal Place of Business:

20 S BROAD STREET
BROOKSVILLE, FL 34601

New Principal Place of Business:

20 WEST HIBISCUS
LAKE PLACID, FL 33852 US

Current Mailing Address:

20 S BROAD STREET
BROOKSVILLE, FL 34601

New Mailing Address:

2 HICKORY AVE
LAKE PLACID, FL 33852 US

FEI Number: 20-5143432

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA & OFFSHORE BUSINESS FORMATION INC
20 S BROAD STREET
BROOKSVILLE, FL 34601 US

Name and Address of New Registered Agent:

FOSTER, BROOKE A
2 HICKORY AVE
LAKE PLACID, FL 33852 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: BROOKE A FOSTER

02/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FOSTER, BROOKE A
Address: 20 S BROAD STREET
City-St-Zip: BROOKSVILLE, FL 34601

Title: MGRM () Delete
Name: FOSTER, GREGG S
Address: 20 S BROAD STREET
City-St-Zip: BROOKSVILLE, FL 34601

Title: MGRM () Delete
Name: FOSTER, BRENDA M
Address: 20 S BROAD STREET
City-St-Zip: BROOKSVILLE, FL 34601

Title: MGRM () Delete
Name: FOSTER, SOMMER N
Address: 20 S BROAD STREET
City-St-Zip: BROOKSVILLE, FL 34601

ADDITIONS/CHANGES:

Title: VP (X) Change () Addition
Name: FOSTER, BROOKE A
Address: 2 HICKORY AVE
City-St-Zip: LAKE PLACID, FL 33852 US

Title: P (X) Change () Addition
Name: FOSTER, GREGG S
Address: 2 HICKORY AVE
City-St-Zip: LAKE PLACID, FL 33852 US

Title: S (X) Change () Addition
Name: FOSTER, BRENDA M
Address: 2 HICKORY AVE
City-St-Zip: LAKE PLACID, FL 33852 US

Title: D (X) Change () Addition
Name: MALOY, SOMMER N
Address: 2 HICKORY AVE
City-St-Zip: LAKE PLACID, FL 33852 US

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: BRENDA MARIE FOSTER

SEC

02/11/2008

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