

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000067038

FILED  
Jan 22, 2009  
Secretary of State

**Entity Name:** HURDLE-DEAN TAX CERTIFICATES, LLC

**Current Principal Place of Business:**

9130 GALLERIA CRT STE 326  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

POB 3774  
MANSFIELD, OH 44907

**New Mailing Address:**

**FEI Number:** 20-5125677

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HURDLE, KATHLEEN C  
9130 GALLERIA CRT  
NAPLES, FL 34109 US

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

HURDLE, KATHLEEN C  
9130 GALLERIA CRT  
SUITE 326  
NAPLES, FL 34109 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: KATHLEEN HURDLE

01/22/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: W.F. HURDLE ENTERPRI, SES PROFIT SHARING PLA  
Address: 1616 LEXINGTON AVE  
City-St-Zip: MANSFIELD, OH 44907

Title: MGR ( ) Delete  
Name: HUNTINGTON NATIONAL, BANK, CUSTODIAN BRENDA  
Address: 41 S. HIGH ST.  
City-St-Zip: COLUMBUS, OH 43287

**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: WF HURDLE ENTERPRISES PROFIT SHARING PLAN

MGR

01/22/2009

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