

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000099914

Entity Name: HK STORAGE, LLC

FILED  
Sep 05, 2012  
Secretary of State

**Current Principal Place of Business:**

190 SOUTH LOWDER STREET  
MACCLENNY, FL 32063

**New Principal Place of Business:**

**Current Mailing Address:**

4529 SAN LORENZO BLVD.  
JACKSONVILLE, FL 32224

**New Mailing Address:**

FEI Number: 20-5716261

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HETSLER, ROBERT  
4529 SAN LORENZO BLVD.  
JACKSONVILLE, FL 32224 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  
Name: HETSLER, ROBERT  
Address: 190 SOUTH LOWDER STREET  
City-St-Zip: MACCLENNY, FL 32063

Title: MGRM  
Name: GARRETT, ANDREW M  
Address: 2125 BOWEN STREET  
City-St-Zip: LOGMONT, CO 80501

Title: MGRM  
Name: HETSLER, ORIANA P  
Address: 4529 SAN LORENZO BLVD  
City-St-Zip: JACKSONVILLE, FL 32224 US

I hereby 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: ROBERT HETSLER

MGRM

09/05/2012

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