

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000116809

Entity Name: HKN SOLUTIONS, L.L.C.

FILED  
Apr 28, 2007  
Secretary of State

## Current Principal Place of Business:

1101 GRAHAM DRIVE  
BRANDON, FL 33547

## New Principal Place of Business:

1915 BLUE SAGE CT  
BRANDON, FL 33547

## Current Mailing Address:

1101 GRAHAM DRIVE  
BRANDON, FL 33547

## New Mailing Address:

1915 BLUE SAGE CT  
BRANDON, FL 33547

FEI Number: 16-1778774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NICHOLAS, WILLIAM E  
1101 GRAHAM DRIVE  
BRANDON, FL 33547 US

## Name and Address of New Registered Agent:

NICHOLAS, WILLIAM E  
1915 BLUE SAGE CT  
BRANDON, FL 33547 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:

04/28/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: NICHOLAS, WILLIAM E  
Address: 1101 GRAHAM DRIVE  
City-St-Zip: BRANDON, FL 33547

Title: MGRM ( ) Delete  
Name: HARP, CLAUDE M  
Address: 9005 PROMISE DRIVE  
City-St-Zip: TAMPA, FL 33626

Title: MGRM ( ) Delete  
Name: BEIL, MARY E  
Address: 1101 GRAHAM DRIVE  
City-St-Zip: BRANDON, FL 33511

Title: MGRM ( ) Delete  
Name: KESSIE, DANNY  
Address: 5245-90TH TERRACE NORTH  
City-St-Zip: PINELLAS PARK, FL 33782

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: NICHOLAS, WILLIAM E  
Address: 1915 BLUE SAGE CT  
City-St-Zip: BRANDON, FL 33547

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

Title: MGRM (X) Change ( ) Addition  
Name: BEIL, MARY E  
Address: 1915 BLUE SAGE CT  
City-St-Zip: BRANDON, FL 33511

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: WILLIAM E NICHOLAS

MGRM

04/28/2007

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