## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L07000000320

1. Entity Name

HOSPITALITY DEPOT LLC



FILED Feb 20, 2008 08:00 A Secretary of State

Principal Place of Business

158 GRIFFIN BOULEVARD PANAMA CITY, FL 32413 Mailing Address

158 GRIFFIN BOULEVARD PANAMA CITY, FL 32413



DO NOT WRITE IN THIS SPACE

02152008 No Chg-LLC CF

CR2E083 (12/07)

4. FEI Number 20-8142234

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DENT, GEORGE 158 GRIFFIN BOULEVARD PANAMA CITY BEACH, FL 32413

## DO NOT WRITE IN THIS SPACE

PANAMA	CITY BEACH, FL 32413 · -	IN TH	IS SPACE
	named entity submits this statement for the purpose of chations of registered agent.		· · · · · · · · · · · · · · · · · · ·
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE
	NOWIII FEE IS \$138.75 y 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR		
NAME	HATCHETT, WILLIAM G	e sta	
STREET ADDRESS	158 GRIFFIN BOULEVARD	•	
CITY-ST-ZIP	PANAMA CITY BEACH, FL 32413		•
TITLE			บกกกกกวาวกด
NAME		na	U00000333209 :/28/08-80003-022 138.75
STREET ADDRESS		üc	150100 00000 OFF 100:10
CITY-ST-ZIP			
TITLE			
NAME		,	
STREET ADDRESS		ו מס או	OT WRITE
CITY-ST-ZIP			and the second of the second o
TITLE		IN TH	IIS SPACE
NAME		1 18.4 1.8	

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2.15-08

850 235-806

Daytime Phon