

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000007906

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** HIDDEN HILLS MOBILE HOME PARK, LLC

**Current Principal Place of Business:**

825 NW 165TH STREET  
CITRA, FL 32113

**New Principal Place of Business:**

**Current Mailing Address:**

825 NW 165TH STREET  
CITRA, FL 32113

**New Mailing Address:**

**FEI Number:** 20-8278385

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THE MILLHORN LAW FIRM  
13710 US HIGHWAY 441,  
SUITE 100  
THE VILLAGES, FL 32159 US

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

VIGNE, TOM J MEMBER  
825 NW 165TH STREET  
CITRA, FL 32113 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: TOM VIGNE

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SHIELDS, JOHN  
Address: 825 NW 165TH STREET  
City-St-Zip: CITRA, FL 32113

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: SHEILDS, JOHN  
Address: 825 NW 165TH STREET  
City-St-Zip: CITRA, FL 32113

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: JOHN SHIELDS

MGR

04/30/2009

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