

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000015535

FILED
Apr 06, 2009
Secretary of State

Entity Name: HOPS INTERNATIONAL LLC

Current Principal Place of Business:

11 SLEEPY HOLLOW COVE
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

11 SLEEPY HOLLOW COVE
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 14-1989812 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WALSH, CHARLES TYRE
11 SLEEPY HOLLOW COVE
LONGWOOD, FL 32750 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 () Delete
Name: WALSH, CHARLES TYRE
Address: 11 SLEEPY HOLLOW COVE
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM () Delete
Name: WALSH, TERRY LEE
Address: 11 SLEEPY HOLLOW COVE
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM () Delete
Name: WALSH, C. CHRISTOPHER
Address: 11 SLEEPY HOLLOW COVE
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM () Delete
Name: WALSH, WILLIAM THOMAS
Address: 951 WABERLY DRIVE
City-St-Zip: LONWOOD, FL 32750

Title: MGRM () Delete
Name: WALSH, MISTY MICHELLE
Address: 835 PASADENA AVENUE
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES:

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

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

Title: MGRM (X) Change () Addition
Name: WALSH, C. CHRISTOPHER
Address: 1400 LAKE ELBERT DRIVE SE
City-St-Zip: WINTER HAVEN, FL 33884

Title: MGRM (X) Change () Addition
Name: WALSH, WILLIAM THOMAS
Address: 940 WAVERLY DRIVE
City-St-Zip: LONGWOOD, FL 32750

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: CHARLES TYRE WALSH

PRES

04/06/2009

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