

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000044260

Entity Name: HH&I, LLC

FILED  
Mar 21, 2008  
Secretary of State

## Current Principal Place of Business:

1135 WESTWOOD DR.  
JACKSONVILLE, FL 32259 US

## New Principal Place of Business:

## Current Mailing Address:

1135 WESTWOOD DR.  
JACKSONVILLE, FL 32259 US

## New Mailing Address:

FEI Number: 26-0151941

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HESTON, SHAWN  
1135 WESTWOOD DR.  
JACKSONVILLE, FL 32259 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: MGR ( ) Delete  
Name: HESTON, SHAWN  
Address: 1135 WESTWOOD DR.  
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

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

Title: MGR ( ) Change (X) Addition  
Name: HESTON, KATHY  
Address: 1135 WESTWOOD DR.  
City-St-Zip: JACKSONVILLE, FL 32259

Title: MGR ( ) Change (X) Addition  
Name: HESTON, NEWT  
Address: 903 N. GOLF DRIVE  
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGR ( ) Change (X) Addition  
Name: HESTON, MICHELLE  
Address: 903 N. GOLF DRIVE  
City-St-Zip: HOLLYWOOD, FL 33021

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: SHAWN HESTON

MGR

03/21/2008

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