

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000078768

Entity Name: HCBMS, LLC

FILED
Jul 18, 2008
Secretary of State

Current Principal Place of Business:

C/O BRYAN HUFNAGLE
5109 FOLIAGE WAY
ST AUGUSTINE, FL 32092 US

New Principal Place of Business:

Current Mailing Address:

C/O BRYAN HUFNAGLE
5109 FOLIAGE WAY
ST AUGUSTINE, FL 32092 US

New Mailing Address:

FEI Number: 13-4364193 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HUFNAGLE, BRYAN
2644 COUNTRY CLUB BLVD
ORANGE PARK, FL 32073 US

Name and Address of New Registered Agent:

HUFNAGLE, BRYAN
5109 FOLIAGE WAY
ST AUGUSTINE, FL 32092 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: BRYAN HUFNAGLE

07/18/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HUFNAGLE, BRYAN
Address: 5109 FOLIAGE WAY
City-St-Zip: ST AUGUSTINE, FL 32092 US

Title: MGRM () Delete
Name: ROTOLO, SHANTAE
Address: 5109 FOLIAGE WAY
City-St-Zip: ST AUGUSTINE, FL 32092 US

ADDITIONS/CHANGES:

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

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: BRYAN HUFNAGLE

MGRM

07/18/2008

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