

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000093652

Entity Name: HSA INVESTMENTS I, LLC

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

1383 CROSSBILL COURT
WESTON, FL 33327 US

New Principal Place of Business:

11440 N. KENDALL DRIVE
204
MIAMI, FL 33176 US

Current Mailing Address:

P O BOX 268390
WESTON, FL 333268390 US

New Mailing Address:

P O BOX 759077
CORAL SPRINGS, FL 330759077 US

FEI Number: 26-0899238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HINDS, AUBREY S
1383 CROSSBILL COURT
WESTON, FL 33327 US

Name and Address of New Registered Agent:

HINDS, AUBREY S
7260 LEMON GRASS DRIVE
PARKLAND, FL 33076 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: AUBREY HINDS

04/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HINDS, AUBREY S
Address: 1383 CROSSBILL COURT
City-St-Zip: WESTON, FL 33327 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HINDS, AUBREY S
Address: P O BOX 759077
City-St-Zip: CORAL SPRINGS, FL 330759077 US

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: AUBREY HINDS

D

04/17/2009

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