

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000096396

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Entity Name:** NOWIHENDRIX INVESTMENTS LLC

**Current Principal Place of Business:**

5300 4TH ST. N.  
401  
ST.PETERSBURG, FL 33703 US

**New Principal Place of Business:**

**Current Mailing Address:**

5300 4TH ST. N.  
401  
ST.PETERSBURG, FL 33703 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

HENDRIX, WILLIAM E OWNER  
5300 4TH ST. N.  
401  
ST. PETERSBURG, FL 33703 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  
Name: HENDRIX, WILLIAM E  
Address: 5300 4TH ST. N. #401  
City-St-Zip: ST. PETERSBURG, FL 33704 US

Title: MGRM  
Name: HENDRIX, NORMA  
Address: 5300 4TH N. #401  
City-St-Zip: ST. PETERSBURG, FL 33703 US

I hereby 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: WILLIAM E.HENDRIX                      MGRM                      03/16/2011

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