

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000004892

FILED
May 18, 2009
Secretary of State

Entity Name: HALEZ LLC

Current Principal Place of Business:

19115 BECKETT DRIVE
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

19115 BECKETT DRIVE
ODESSA, FL 33556

New Mailing Address:

FEI Number: 39-2069129 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

ROSS, CARY
6987 EAST FOWLER AVE.
TAMPA, FL 33617 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: () Delete
Name:
Address:
City-St-Zip:

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

ADDITIONS/CHANGES:

Title: P () Change (X) Addition
Name: HALE, THOMAS J
Address: 19115 BECKETT DR
City-St-Zip: ODESSA, FL 33556 US

Title: V () Change (X) Addition
Name: HALE, BARBARA E
Address: 19115 BECKETT DR
City-St-Zip: ODESSA, FL 33556 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: THOMAS J HALE

P

05/18/2009

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