

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000006124

Entity Name: HPS ALASKA, LLC.

**FILED**  
**Apr 07, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

625 MAIN STREET, STE. #27  
WINDERMERE, FL 34786

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 730  
WINDERMERE, FL 34786

**New Mailing Address:**

FEI Number: 26-2253561

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HUBER, DONALD M  
625 MAIN STREET, STE. #27  
WINDERMERE, FL 34786 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: DONALD M. HUBER REVOCABLE TRUST  
Address: 8051 WHITFORD CT.  
City-St-Zip: WINDERMERE, FL 34786

Title: MGR  
Name: PIPPEN, JERRY  
Address: P.O. BOX 47011  
City-St-Zip: PEDRO BAY, AK 99647

Title: MGR  
Name: PIPPEN, KAREN  
Address: P.O. BOX 47011  
City-St-Zip: PEDRO BAY, AK 99647

Title: MGRM  
Name: JOSEPH & CANDACE SEAVERN'S FAM. REVOC.TRUST  
Address: 10158 EAST TOPAZ DRIVE  
City-St-Zip: SCOTTSDALE, AZ 85258

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: DONALD M. HUBER

MGR

04/07/2011

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