

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000100876

Entity Name: HKM PARTNERS LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

1526 UNIVERSITY BOULEVARD W
SUITE 435
JACKSONVILLE, FL 32217

New Principal Place of Business:

Current Mailing Address:

1526 UNIVERSITY BOULEVARD W
SUITE 435
JACKSONVILLE, FL 32217

New Mailing Address:

FEI Number: 26-3608157

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSTON, MICHAEL A
1526 UNIVERSITY BOULEVARD W
SUITE 435
JACKSONVILLE, FL 32217 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 () Delete
Name: JOHNSTON, MICHAEL A
Address: 129 INDIAN HAMMOCK LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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

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

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: JOHNSTON, MICHAEL A
Address: 129 INDIAN HAMMOCK LANE
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: MGRM () Change (X) Addition
Name: HAUG, TIMOTHY
Address: 1877 CHRISTOPHER POINT RD S
City-St-Zip: JACKSONVILLE, FL 32217

Title: MGRM () Change (X) Addition
Name: MINOT, ALFRED
Address: 24600 DEER TRACE DRIVE
City-St-Zip: PONTE VEDRA, FL 32082

Title: MGRM () Change (X) Addition
Name: CONNER, KEITH
Address: 1009 HEATHERWOOD WAY
City-St-Zip: MELBOURNE, FL 32904

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: TIM HAUG

MGRM

04/29/2009

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