

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000100876

Entity Name: HKM PARTNERS LLC

FILED  
Mar 03, 2010  
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: MGR  
Name: JOHNSTON, MICHAEL A  
Address: 129 INDIAN HAMMOCK LANE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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

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

Title: MGRM  
Name: CONNER, KEITH  
Address: 1009 HEATHERWOOD WAY  
City-St-Zip: MELBOURNE, FL 32904

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: TIM HAUG

MGRM

03/03/2010

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