

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L08000107772

**FILED**  
**Sep 14, 2011**  
**Secretary of State**

**Entity Name:** AL HOPKINS ENTERPRISES LLC

**Current Principal Place of Business:**

109 CRYSTAL STREET  
CRYSTAL RIVER, FL 34429

**New Principal Place of Business:**

109 CRYSTAL STREET SUITE C  
CRYSTAL RIVER, FL 34429

**Current Mailing Address:**

109 CRYSTAL STREET  
CRYSTAL RIVER, FL 34429

**New Mailing Address:**

109 CRYSTAL STREET SUITE C  
CRYSTAL RIVER, FL 34429

**FEI Number:** 26-3746392

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SERRA, EDWARD CPA  
6118 W CORPORATE OAK DRIVE  
CRYSTAL RIVER, FL 34429 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:** HOPKINS, AL  
**Address:** 806 NE 5TH STREET  
**City-St-Zip:** CRYSTAL RIVER, FL 34429

**Title:** MGRM  
**Name:** HOPKINS, EPHEUS  
**Address:** 50 AMBERSTONE CT.  
**City-St-Zip:** ANNAPOLIS, MD 21403

**Title:** SEC  
**Name:** PERRY, SOPHIA  
**Address:** 90 S. ADAMS STREET  
**City-St-Zip:** BEVERLY HILLS, FL 34465

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:** AL L. HOPKINS

MGRM

09/14/2011

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