

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000010487

**FILED**  
**Feb 22, 2011**  
**Secretary of State**

**Entity Name:** HELPING HAND DESIGNS LLC

**Current Principal Place of Business:**

18308 TRIPLE E RD.  
FERNDAL, FL 34729

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 121052  
CLERMONT, FL 34712

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KEITH HOGAN PROPERTIES INC.  
310 ALMOND ST.  
CLERMONT, FL 34711 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: HOGAN, SARAH L  
Address: PO BOX 121052  
City-St-Zip: CLERMONT, FL 34712

Title: MGRM  
Name: HOGAN, ROBERT K  
Address: PO BOX 121052  
City-St-Zip: CLERMONT, FL 34712

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: ROBERT K HOGAN

MGRM

02/22/2011

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