

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000086985

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** HOPS HANDS-ON PROBLEM SOLVING, L.L.C.

**Current Principal Place of Business:**

206 HIDEAWAY COURT  
MINNEOLA, FL 34715

**New Principal Place of Business:**

**Current Mailing Address:**

206 HIDEAWAY COURT  
MINNEOLA, FL 34715

**New Mailing Address:**

**FEI Number:** 27-1019515

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

HOLLINGSWORTH, REBECCA L FRP  
635 W HIGHWAY 50 SUITE A-1  
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: MGRM  
Name: LOCKE, DANIEL  
Address: 206 HIDEAWAY COURT  
City-St-Zip: MINNEOLA, FL 34715

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: DANIEL LOCKE

MGRM

01/05/2011

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