

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000052781

**FILED**  
**Jan 11, 2012**  
**Secretary of State**

**Entity Name:** RENEE D HACKLEMAN, LLC

**Current Principal Place of Business:**

850 FT. PICKENS RD. UNIT 930  
PENSACOLA BEACH, FL 325615218

**New Principal Place of Business:**

**Current Mailing Address:**

850 FT. PICKENS RD. UNIT 930  
PENSACOLA BEACH, FL 325615218

**New Mailing Address:**

**FEI Number:** 45-1846681

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HACKLEMAN, RENEE D  
850 FT. PICKENS RD. UNIT 930  
PENSACOLA BEACH, FL 325615218 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: HACKLEMAN, RENEE D  
Address: 850 FT. PICKENS RD. UNIT 930  
City-St-Zip: PENSACOLA BEACH, FL 325615218

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: RENEE D HACKLEMAN

MGRM

01/11/2012

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