


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2007 08:00 A
Secretary of State

DOCUMENT # L95000000326 1. Entity Name HANKINS BUSINESS MANAGERS, L.C.	
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Principal Place of Business 2708 S. PENINSULA DR. DAYTONA BEACH, FL 32118	Mailing Address 2708 S. PENINSULA DR. DAYTONA BEACH, FL 32118
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04262007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 59-3310395	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent HANKINS, CRAIG M 2708 S. PENINSULA DR. DAYTONA BEACH, FL 32118	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2007**

00000780090
05/24/07-80068-016 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM HANKINS, CRAIG M 2708 S. PENINSULA DRIVE DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MEM HANKINS, SHARON T 2708 S. PENINSULA DRIVE DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MEM MAHLON T. TUCK, TRUSTEE 2708 S. PENINSULA DRIVE DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	

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IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Craig M Hankins* HANKINS APR 27 2007 386-871-7185

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #