

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000259

FILED
Mar 09, 2005
Secretary of State

Entity Name: HAGERTON, L.C.

Current Principal Place of Business:

992 TAMIAMI TRAIL
SUITE G
PORT CHARLOTTE, FL 33953

New Principal Place of Business:

Current Mailing Address:

992 TAMIAMI TRAIL
SUITE G
PORT CHARLOTTE, FL 33953

New Mailing Address:

FEI Number: 65-0820316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINKERTON, BRENT A
992 TAMIAMI TRAIL
SUITE G
PORT CHARLOTTE, FL 33953 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/MEMBERS:

Title: MGRM () Delete
Name: PINKERTON, BRENT A
Address: 670 N. RIVER ROAD
City-St-Zip: VENICE, FL 34293

Title: MGRM () Delete
Name: HINES, CHARLES D
Address: 750 SHETLAND CIRCLE
City-St-Zip: NOKOMIS, FL

Title: MGRM () Delete
Name: HAGAN, KEVIN P
Address: 501 HARBOR DR., SOUTH
City-St-Zip: VENICE, FL

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: BRENT PINKERTON

MGRM

03/09/2005

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