

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L98000000860

Entity Name: HAV PROPERTIES, L.C.

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

5912 NEW KINGS ROAD  
JACKSONVILLE, FL 32236

**New Principal Place of Business:**

**Current Mailing Address:**

5912 NEW KINGS ROAD  
JACKSONVILLE, FL 32236

**New Mailing Address:**

FEI Number: 59-3519146

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NOLAN, JAMES A P.A.  
4114 HERSCHEL STREET  
STE. 105  
JACKSONVILLE, FL 32210 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: PD  
Name: SHAFER, VICKI  
Address: 5912 NEW KINGS ROAD  
City-St-Zip: JACKSONVILLE, FL 32209

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: VICKI SHAFER

PD

04/30/2010

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