## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Jan 14, 2008 08:00 A Secretary of State **DOCUMENT # L99000000004** 1. Entity Name 3-HONC, L.L.C. Principal Place of Business Mailing Address 1130 PONDELLA ROAD 1130 PONDELLA ROAD SUITE 3 SUITE 3 CAPE CORAL, FL 33909 CAPE CORAL, FL 33909 01082008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0898996 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HONC, VINCENT E DO NOT WRITE 1130 PONDELLA ROAD SUITE 3 IN THIS SPACE CAPE CORAL, FL 33909 3. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOWIII FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGR TITLE HONC, VINCENT E NAME 1130-3 PONDELLA ROAD STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33909 MALE 000000782570 01/15/08-80081-016 139.75 NAME STREET ADDRESS CITY-ST-ZIP MILE NAME STREET ADDRESS DO NOT WRITE CITY+ST-2/P TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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.