2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000000964

1. Entity Name HHRD, LLC



Principal Place of Business

1241 FRUITVILLE ROAD SARASOTA, FL 34236 Mailing Address

1241 FRUITVILLE RD SARASOTA, FL 34236

FILED Apr 11, 2008 08:00 All Secretary of State



03102008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 65-0896290

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BERGS, IONIE 1241 FRUITVILLE ROAD SARASOTA, FL 34236

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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.		
SIGNATURI	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Regis	stored Agent signature required when reinstating) DATE
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BERGS, IONIE S 1241 FRUITVILLE ROAD SARASOTA, FL 34236	0 17 23 7 00 000 11 010 130.13
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY+ST-ZIP		DO NOT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
NAME STREET ADDRESS CITY-ST-ZIP 2 4		
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.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

3/18/08 V_

Daytime Phone #