2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 10, 2005 08:00 AM Secretary of State

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1. Entity Name HOUSING MANAGEMENT ASSOCIATES, L.C.



Principal Place of Business

4850 MOBILE HWY PENSACOLA, FL 32506 Mailing Address

4850 MOBILE HWY PENSACOLA, FL 32506



01042005 No Chg-LLC

CR2E083 (10/03)

Daytime Phone #

DO NOT WRITE IN THIS SPACE 4. FEI Number

Applied For 59-3597952 Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required

G. Name and Address of Current Registered Agent

DEAN, JOHN 4850 MOBILE HIGHWAY PENSACOLA, FL 32506

SIGNATURE: >

SIGNATURE AND TYPED OR PRINTED NAME

DO NOT WRITE IN THIS SPACE

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			
	Filing Fee is \$50.00 Due by May 1, 2005	<i>*</i>	,			
9.	MANAGING MEMBERS/MANAGERS	gradient to a fine of the second of the seco	U00000176213			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DEAN, JOHN 4850 MOBILE HIGHWAY PENSACOLA, FL 32506			50.00		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	s					
11. I hereby indicate limited I	y certify that the information supplied with this filing does not qued on this report is true and accurate and that my signature shallability company or the receiver or trustee empowered to execu	ualify for the exemption stated in Section 119.07(3)(i), Flor all have the same legal effect as if made under oath; that ute this report as required by Chapter 608, Florida Statute	rida Statutes. I further certify that I am a managing member or mass.	the information anager of the		