

2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Feb 22, 2006 08:00 AM
Secretary of State

DOCUMENT # L99000007723

1. Entity Name
HARTFORD OF FLORIDA, L.L.C.



Principal Place of Business
200 COLONIAL CENTER PKWY
500
LAKE MARY, FL 32746

Mailing Address
HARTFORD PLAZA
HARTFORD, CT 06115



02142006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
06-1571222

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

Filing Fee is \$50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

| | |
|----------------|-------------------------|
| TITLE | MGR |
| NAME | YASS, ROBERT |
| STREET ADDRESS | 50 RANGER LANE |
| CITY-STATE-ZIP | WEST HARTFORD, CT 06117 |
| TITLE | MGR |
| NAME | ZIMMERMAN, PAUL |
| STREET ADDRESS | 141 RIVERVIEW ROAD |
| CITY-STATE-ZIP | GLASTONBURY, CT 06033 |
| TITLE | AS |
| NAME | CUBANSKI, JAMES |
| STREET ADDRESS | 29 BIDWELL ST |
| CITY-STATE-ZIP | GLASTONBURY, CT 06033 |
| TITLE | S |
| NAME | COSTELLO, RICHARD G |
| STREET ADDRESS | 8 JOYCE LANE |
| CITY-STATE-ZIP | SIMSBURY, CT 06070 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-STATE-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-STATE-ZIP | |

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing 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

DATE

DAYTIME PHONE #