

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M02000003143

**FILED**  
**Jan 06, 2004**  
**Secretary of State**

**Entity Name:** HICKEY HILL PARTNERS, LLC

**Current Principal Place of Business:**

5364 ASCOT BEND  
BOCA RATON, FL 33496

**New Principal Place of Business:**

**Current Mailing Address:**

5364 ASCOT BEND  
BOCA RATON, FL 33496

**New Mailing Address:**

**FEI Number:** 51-0416852

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GALPERN, DAVID  
5364 ASCOT BEND  
BOCA RATON, FL 33496 US

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

GALPERN, DAVID H  
5364 ASCOT BEND  
BOCA RATON, FL 33496 US

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:** DAVID H GALPERN

01/06/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

**Title:** MGR ( ) Delete  
**Name:** GALPERN, DAVID H  
**Address:** 5364 ASCOT BEND  
**City-St-Zip:** BOCA RATON, FL 33496

**ADDITIONS/CHANGES:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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:** DAVID H GALPERN

MGR

01/06/2004

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