

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001547

FILED  
Apr 21, 2008  
Secretary of State

Entity Name: HVM L.L.C.

**Current Principal Place of Business:**

100 DUNBAR STREET  
SPARTANBURG, SC 29306

**New Principal Place of Business:**

**Current Mailing Address:**

100 DUNBAR STREET  
SPARTANBURG, SC 29306

**New Mailing Address:**

FEI Number: 74-2850746

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 US

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

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DELAPP, GARY A  
Address: 100 DUNBAR STREET  
City-St-Zip: SPARTANBURG, SC 29306

Title: MGRM ( ) Delete  
Name: ROGERS, F. JOSEPH  
Address: 100 DUNBAR STREET  
City-St-Zip: SPARTANBURG, SC 29306

Title: MGRM ( ) Delete  
Name: GROVES, TIMOTHY B  
Address: 100 DUNBAR STREET  
City-St-Zip: SPARTANBURG, SC 29306

Title: MGRM ( ) Delete  
Name: WOOLRIDGE, STEPHEN T  
Address: 100 DUNBAR STREET  
City-St-Zip: SPARTANBURG, SC 29306

Title: MGRM ( ) Delete  
Name: WEISS, DAVID  
Address: 100 DUNBAR STREET  
City-St-Zip: SPARTANBURG, SC 29306

Title: MGRM (X) Delete  
Name: BUSSANI, PIERO  
Address: 100 DUNBAR STREET  
City-St-Zip: SPARTANBURG, SC 29306

**ADDITIONS/CHANGES:**

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

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

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

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

Title: MGRM (X) Change ( ) Addition  
Name: CLAYTON, ROY G  
Address: 100 DUNBAR STREET  
City-St-Zip: SPARTANBURG, SC 29306

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: F JOSEPH ROGERS

MGRM

04/21/2008

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