## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003560

**Entity Name:** HANOVER/METLIFE G.P. LLC

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5847 SAN FELIPE, SUITE 3600 C/O THE HANOVER COMPANY C/O THE HANOVER COMPANY 5847 SAN FELIPE, SUITE 3600

HOUSTON, TX 77057 HOUSTON, TX 77057

Current Mailing Address: New Mailing Address:

5847 SAN FELIPE, SUITE 3600 C/O THE HANOVER COMPANY C/O THE HANOVER COMPANY 5847 SAN FELIPE, SUITE 3600 HOUSTON, TX 77057 HOUSTON, TX 77057

FEI Number: 76-0635919 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CAPITOL CORPORATE SERVICES, INC. 155 OFFICE PLAZA DR. SUITE A TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

Name: HANOVER/METLIFE MASTER LIMITED PARTNERSHIP Name:

Name: HANOVER/METLIFE MASTER LIMITED PARTNERSHIP Name:
Address: 5847 SAN FELIPE, SUITE 3600 Address:
City-St-Zip: HOUSTON, TX 77057 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: KATHY K BINFORD VP 04/15/2009