

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 12, 2005 8:00 am
Secretary of State

04-12-2005 90020 005 ****50.00

20029796




04062005No Chg-LLC CR2E083 (10/03)

4. FEI Number	Applied For
58-2259309	Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

DOCUMENT # M99000000079

1. Entity Name
HCAP, LLC



Principal Place of Business 1380 WEST PACES FERRY RD ATLANTA, GA 30327	Mailing Address 1380 WEST PACES FERRY RD ATLANTA, GA 30327
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM THE HARDIN GROUP 1380 WEST PACES FERRY ROAD ATLANTA, GA 30327
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11. I hereby certify that the information supplied with this filing does not qualify 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 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: M. Brantley Barrow **M. Brantley Barrow** **4-8-05** **404-264-0404**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #