

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000040867

**Entity Name:** RIVERA & HANES, P.L.

**Current Principal Place of Business:**

15915 EDGEFIELD RD.  
WELLINGTON, FL 33414

**Current Mailing Address:**

15915 EDGEFIELD RD.  
WELLINGTON, FL 33414

**FEI Number:** 77-0640504

**Certificate of Status Desired:** No

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

RIVERA, HECTOR C  
15915 EDGEFIELD RD.  
WELLINGTON, FL 33414 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

**Authorized Person(s) Detail :**

Title MGRM  
Name RIVERA, HECTOR C  
Address 15915 EDGEFIELD RD.  
City-State-Zip: WELLINGTON FL 33414

Title MGRM  
Name HANES, JOHN WIII  
Address 11818 OSPREY POINTE CIR.  
City-State-Zip: WELLINGTON FL 33449

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOHN W HANES III

**MANAGING MEMBER**

**04/15/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date