

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000118180

**Entity Name:** HLMR, LLC

**Current Principal Place of Business:**

315 GROVELAND STREET  
ORLANDO, FL 32804

**Current Mailing Address:**

315 GROVELAND STREET  
ORLANDO, FL 32804 US

**FEI Number:** 46-2507162

**Certificate of Status Desired:** No

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

LOWMAN, JR., WILLIAM R. ESQ.  
SHUFFIELD, LOWMAN & WILSON, PA  
1000 LEGION PLACE, SUITE 1700  
ORLANDO, FL 32801 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:** WILLIAM R. LOWMAN, JR. ESQ.

03/15/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MANAGER  
Name MASSEY, HARVEY L.  
Address 315 GROVELAND STREET  
City-State-Zip: ORLANDO FL 32804

Title MANAGER  
Name MASSEY, CAROL A.  
Address 315 GROVELAND STREET  
City-State-Zip: ORLANDO FL 32804

Title MANAGER, PRESIDENT, CEO  
Name MASSEY, ANTHONY L  
Address 315 GROVELAND STREET  
City-State-Zip: ORLANDO FL 32804

Title MANAGER, VICE PRESIDENT,  
SECRETARY  
Name FARRELL-MASSEY, ANDREA  
Address 315 GROVELAND STREET  
City-State-Zip: ORLANDO FL 32804

Title EXECUTIVE VICE PRESIDENT, CFO,  
TREASURER, ASST. SECRETARY  
Name NOWRY, JEAN  
Address 315 GROVELAND STREET  
City-State-Zip: ORLANDO FL 32804

*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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANTHONY L. MASSEY

PRESIDENT

03/15/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date