2008 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2008

DOCUMENT # A98000002305

1. Entity Name
HOOKS PROPERTIES, LTD.

FILED
08 JAN 29 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
53 LAKE MORTON DRIVE LAKELAND, FL 33801	53 LAKE MORTON DRIVE LAKELAND, FL 33801

01162008 Chg-LP CR2E003 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3535521 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BAYLIS, STEPHEN W 53 LAKE MORTON DRIVE LAKELAND, FL 33801	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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.

FILE NOW!!! FEE IS $500.00
After May 1, 2008, Fee will be $900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #		STREET ADDRESS	
NAME	HOOKS, MARY HELEN	CITY-ST-ZIP	200115895022 01/23/08--01032--007 **500.00
STREET ADDRESS	% HOLLIS HOOKS, 1411 BRIARWOOD LANE		
CITY-ST-ZIP	LAKELAND, FL 33803		
DOCUMENT #		STREET ADDRESS	
NAME	HOOKS, HOLLIS H	CITY-ST-ZIP	
STREET ADDRESS	1411 BRIARWOOD LANE		
CITY-ST-ZIP	LAKELAND, FL 33803		
DOCUMENT #		STREET ADDRESS	1701 Gulf View Drive
NAME	HOOKS, DAVID H	CITY-ST-ZIP	Belleair, FL 33756
STREET ADDRESS	500 W MADISON SUITE 2750		
CITY-ST-ZIP	CHICAGO, FL 60661		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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STREET ADDRESS			
CITY-ST-ZIP			

STAPLE CHECK HERE

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: _____ Hollis H. Hooks 1-18-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #

863-687-6211