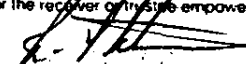


FILED
Mar 03, 2008 8:00 am
Secretary of State

03-03-2008 90406 005 ***138.75

2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L00000006354					
1. Entity Name HITCHENS QUALITY HOMES, L.L.C.					
Principal Place of Business 1990 MAIN ST STE. 801 SARASOTA, FL 34236		Mailing Address 1990 MAIN ST STE. 801 SARASOTA, FL 34236			
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 65-1012629	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent GLENDINNING, RENE M 1990 MAIN ST STE. 801 SARASOTA, FL 34236				7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HITCHENS, RALPH 616 ARCON BLVD. SARASOTA, FL 34241	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HITCHENS, RALPH 6816 ARECA BLVD SARASOTA FL 34241	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HITCHENS, ANDREW CHARLES 6816 ARCON BLVD SARASOTA, FL 34241	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HITCHENS, ANDREW CHARLES 6816 ARECA BLVD SARASOTA FL 34241	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HITCHENS, KATHLEEN JOAN 6816 ARCON BLVD. SARASOTA, FL 34241	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HITCHENS, KATHLEEN JOAN 6816 ARECA BLVD SARASOTA FL 34241	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
11. 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 managing member or manager of the limited liability company or the receiver of the same empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: 			2/27/2008		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone		