


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 09, 2005 8:00 am
Secretary of State

02-09-2005 90154 008 ****50.00

DOCUMENT # L03000055528 1. Entity Name DAVID HOOVER ENTERPRISES LLC																																																					
Principal Place of Business 510 HYDE PARK DR CRESTVIEW FL 32539				Mailing Address 510 HYDE PARK DR CRESTVIEW FL 32539																																																	
2. Principal Place of Business 111 TYNER DR Suite, Apt. #, etc.		3. Mailing Address 111 TYNER DR Suite, Apt. #, etc.																																																			
City & State CRESTVIEW FL Zip 32539 Country USA		City & State CRESTVIEW FL Zip 32539 Country USA		4. FEI Number 20-0508772 Applied For <input type="checkbox"/> Not Applicable																																																	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent HOOVER, DAVID 510 HYDE PARK DR CRESTVIEW FL 32539																																																	
7. Name and Address of New Registered Agent Name HOOVER DAVID Street Address (P.O. Box Number is Not Acceptable) 111 TYNER DR City CRESTVIEW FL Zip Code 32539				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 <u>DAVID HOOVER</u> <u>D. Hoover</u> <u>2/3/05</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>																																																	
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2005																																																					
9. MANAGING MEMBERS / MANAGERS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:40%;"> MGR HOOVER, DAVID 510 HYDE PARK DR CRESTVIEW FL 32539 </td> <td style="width:30%; text-align: right;"> <input type="checkbox"/> Delete </td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOOVER, DAVID 510 HYDE PARK DR CRESTVIEW FL 32539	<input type="checkbox"/> Delete																						10. ADDITIONS / CHANGES <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width:40%;"> MGR HOOVER DAVID 111 TYNER DR CRESTVIEW FL 32539 </td> <td style="width:30%; text-align: right;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>			TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOOVER DAVID 111 TYNER DR CRESTVIEW FL 32539	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																					
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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: D. Hoover **DAVID HOOVER** 2/3/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #