2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000015780

Entity Name: THE HOSKINSON GROUP LLC

FILED Feb 17, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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13820 OLD ST. AUGUSTINE RD. SUITE 113-144 JACKSONVILLE, FL 32258

New Mailing Address: Current Mailing Address:

13820 OLD ST. AUGUSTINE RD, 13820 OLD ST. AUGUSTINE RD. SUITE 113-144 SUITE 113-144 JACKSONVILLE, FL 32258 JACKSONVILLE, FL 32258

FEI Number: 84-1670669 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BAILIS, RONALD S BAILIS, RONALD S 13820 OLD ST. AUGUSTINE RD. 13820 OLD ST. AUGUSTINE RD. SUITE 113-144 SUITE 113-144 ST. AUGUSTINE, FL 32092 US JACKSONVILLE, FL 32092 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: 02/17/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete GORDON, HOSKINSON Name: Name: Address: 13820 OLD ST. AUGUSTINE RD, STE 113-144 Address: City-St-Zip: JACKSONVILLE, FL 32258 City-St-Zip: Title: Title: CEO () Change (X) Addition () Delete Name: Name: GORDON, HOSKINSON Address: Address: 13820 OLD ST. AUGUSTINE RD. STE 113-144 City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32258 Title: () Delete Title: () Change (X) Addition Name: GORDON, HOSKINDON Name: 13820 OLD ST. AUGUSTINE RD, STE 113-144 Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32258 Title: () Delete Title: () Change (X) Addition Name: Name: RONALD, BAILIS S 13820 OLD ST. AUGUSTINE RD, STE 113-144 Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32258 Title: () Delete Title: () Change (X) Addition JAY, CULBERTH Name: Name: 13820 OLD ST. AUGUSTINE RD, STE 113-144 Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32258 Title: () Delete Title: () Change (X) Addition DENNIS, PATRICK Name: Name: Address: Address: 13820 OLD ST. AUGUSTINE RD, STE 113-144 JACKSONVILLE, FL 32258 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: GORDON HOSKINSON **MGRM** 02/17/2009