2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 26, 2009
Secretary of State

DOCUMENT# L05000122018

Entity Name: HOSKI, L.L.C.

Current Principal Place of Business:

1800 SECOND STREET, SUITE 97
SARASOTA, FL 34236

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 25363
SARASOTA, FL 34277

New Mailing Address:

FEI Number: 20-5388657 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCGINNESS, W. LEE
1800 SECOND STREET, SUITE 97
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	HOSKINSON, F. BRYAN	
Address:	P. O. BOX 25363	
City-St-Zip:	SARASOTA, FL 34277	
Title:	MGR	( ) Delete
Name:	HOSKINSON, MARY L	
Address:	3225 KINGS WOOD DRIVE	
City-St-Zip:	SARASOTA, FL 34232	
Title:	MGR	( ) Delete
Name:	HOSKINSON, GEORGE D	
Address:	6216 98TH STREET EAST	
City-St-Zip:	BRADENTON, FL 34202	
Title:	MGR	( ) Delete
Name:	BELL, MARGARET J	
Address:	1888 MORRIS STREET	
City-St-Zip:	SARASOTA, FL 34239	
Title:	MGR	( ) Delete
Name:	HOSKINSON, KENNETH E JR	
Address:	P. O. BOX 1411	
City-St-Zip:	SARASOTA, FL 34230	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: F. BRYAN HOSKINSON MGR 03/26/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date