

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000007684

Entity Name: HOKUS POKUS, LLC

FILED
Apr 10, 2007
Secretary of State

Current Principal Place of Business:

8535 BAYMEADOWS ROAD
SUITE 2
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

7370 SECRET WOODS TRAIL
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: 20-4295402

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THIELEN, TIMOTHY A SR
6710 LANDOVER CIRCLE
TALLAHASSEE, FL 32317 US

Name and Address of New Registered Agent:

THIELEN, TIMOTHY A SR
1915 HILLBROOKE TRAIL
STE 1
TALLAHASSEE, FL 32311 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:

04/10/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: THIELEN, TIMOTHY A SR
Address: 6710 LANDOVER CIRCLE
City-St-Zip: TALLAHASSEE, FL 32317

Title: MGR () Delete
Name: STEVENS, MARY D
Address: 7370 SECRET WOODS TRAIL
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGR () Delete
Name: LOGAN, CAROL A
Address: 7370 SECRET WOODS TRAIL
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: THIELEN, TIMOTHY A SR
Address: 1915 HILLBROOKS TRAIL - SUITE 1
City-St-Zip: TALLAHASSEE, FL 32311

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: LOGAN, CAROL A
Address: 10000 GATE PARKWAY NO. #1412
City-St-Zip: JACKSONVILLE, FL 32246

I hereby certify that the information supplied with this filing does not qualify for the 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: MARY D STEVENS

MGR

04/10/2007

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