


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 28, 2008 8:00 am**  
**Secretary of State**

04-28-2008 90040 033 \*\*\*138.75

DOCUMENT # L06000051991	
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1. Entity Name  
HOBBS ROAD INVESTORS, LLC

Principal Place of Business  
2910 BAY TO BAY BLVD.  
SUITE 200  
TAMPA, FL 33629

Mailing Address  
2910 BAY TO BAY BLVD.  
SUITE 200  
TAMPA, FL 33629

2. Principal Place of Business - No P.O. Box #  
3410 Henderson Blvd.

3. Mailing Address  
3410 Henderson Blvd.

Suite, Apt. #, etc.  
200

Suite, Apt. #, etc.  
200

City & State  
Tampa FL

City & State  
Tampa FL

Zip  
33609

Country  
USA

Zip  
33609

Country  
USA

04092008 Chg-LLC CR2E083 (12/06)

4. FEI Number  
20-5181562

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KENNEDY, JOSEPH A  
2910 BAY TO BAY BLVD.  
SUITE 200  
TAMPA, FL 33629

7. Name and Address of New Registered Agent Change

Name Joseph Kennedy  
Street Address (P.O. Box Number is Not Acceptable) 3410 Henderson Blvd. #200  
City Tampa FL Zip Code 33609

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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

TITLE MGRM ☐ Delete  
NAME KENNEDY, JOSEPH A  
STREET ADDRESS 2910 BAY TO BAY BLVD. SUITE 200  
CITY-ST-ZIP TAMPA, FL 33629

TITLE MGR ☐ Delete  
NAME KENNEDY, DAVID A  
STREET ADDRESS 2910 BAY TO BAY BLVD. SUITE 200  
CITY-ST-ZIP TAMPA, FL 33629

TITLE MGR ☒ Delete  
NAME GIBSON, WILLIAM L  
STREET ADDRESS 2910 BAY TO BAY BLVD. SUITE 200  
CITY-ST-ZIP TAMPA, FL 33629

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition  
NAME 3410 Henderson Blvd. #200  
STREET ADDRESS Tampa FL 33609  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME 3410 Henderson Blvd. #200  
STREET ADDRESS Tampa FL 33609  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4-23-08

Date

813 554 1200

Daytime Phone #