### 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

### **DOCUMENT # L06000062570**

1. Entity Name

HITCHCOCK CORNERS, LLC



FILED Jan 28, 2008 08:00 A Secretary of State

Principal Place of Business

Mailing Address

. 106 NW DRANE STREET PLANT CITY, FL 33563 .106 NW DRANE STREET PLANT CITY, FL 33563



01232008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-5036847 Applied For Not Applicable

5. Certificate of Status Desired

M.

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROOKS, EDWARD M 106 NW DRANE STREET PLANT CITY, FL 33563

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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

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROOKS, EDWARD M 106 NW DRANE STREET PLANT CITY, FL 33563 MGRM ROOKS, ISAAC F JR 106 NW DRANE STREET PLANT CITY, FL 33563
TITLE NAME STREET ADDRESS CITY-ST-ZIP TUTLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with this filing does not qualify for the e

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11. If 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 eath; that I am a managing member or manager of the limited liability company or the receiver or mustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE** 

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

1/24/08

813-752-211

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