

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000066237

FILED  
Apr 29, 2007  
Secretary of State

**Entity Name:** HAWKS RIVER INVESTMENTS LLC

**Current Principal Place of Business:**

209 OHIO ROAD  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 21937  
WEST PALM BEACH, FL 334161937

**New Mailing Address:**

**FEI Number:** 42-1709128

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BATCHELOR, CHRISTOPHER R  
209 OHIO ROAD  
LAKE WORTH, FL 33467 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: BATCHELOR, RICHARD  
Address: 209 OHIO ROAD  
City-St-Zip: LAKE WORTH, FL 33467

Title: MGRM ( ) Delete  
Name: BATCHELOR, DEBORAH H  
Address: 209 OHIO ROAD  
City-St-Zip: LAKE WORTH, FL 33467

Title: MGRM ( ) Delete  
Name: BATCHELOR, CHRISTOPHER R  
Address: 209 OHIO ROAD  
City-St-Zip: LAKE WORTH, FL 33467

**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:

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: CHRISTOPHER BATCHELOR

MGRM

04/29/2007

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