

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000090312

FILED
May 12, 2009
Secretary of State

Entity Name: HAWK LAND INVESTMENTS, LLC.

Current Principal Place of Business:

8230 CALOOSAHATCHEE DRIVE, S.W.
MOORE HAVEN, FL 33471 US

New Principal Place of Business:

1047 CALOOSAHATCHEE DRIVE
MOORE HAVEN, FL 33471 US

Current Mailing Address:

8230 CALOOSAHATCHEE DRIVE, S.W.
MOORE HAVEN, FL 33471 US

New Mailing Address:

1047 CALOOSAHATCHEE DRIVE
MOORE HAVEN, FL 33471 US

FEI Number: 20-5551336 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GEAKE, ELLEN H
8230 CALOOSAHATCHEE DRIVE, S.W.
MOORE HAVEN, FL 33471 US

Name and Address of New Registered Agent:

GEAKE, ELLEN H
1047 CALOOSAHATCHEE DRIVE
MOORE HAVEN, FL 33471 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: ELLEN HAWK GEAKE

05/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GEAKE, ELLEN H
Address: 8230 CALOOSAHATCHEE DRIVE, S.W.
City-St-Zip: MOORE HAVEN, FL 33471 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GEAKE, ELLEN H
Address: 1047 CALOOSAHATCHEE DRIVE
City-St-Zip: MOORE HAVEN, FL 33471 US

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: ELLEN HAWK GEAKE

MGR

05/12/2009

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