

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000000986

FILED
Feb 20, 2008
Secretary of State

Entity Name: HENDRICKS SQUARE I LLC

Current Principal Place of Business:

1702 RIVER ROAD
2
JACKSONVILLE, FL 32207

New Principal Place of Business:

Current Mailing Address:

1702 RIVER ROAD
2
JACKSONVILLE, FL 32207

New Mailing Address:

FEI Number: 20-8147607

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CURINGTON, JOHN W
305 PABLO ROAD
PONTA VEDRA BEACH, FL 32082 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: MGRM () Delete
Name: KIMBALL, JOYCE S
Address: PO BOX 561
City-St-Zip: HOLUALOA, HI 96725

Title: MGRM (X) Delete
Name: OTTEN, KRISTEN
Address: 275 ST. AGNES CIRCLE
City-St-Zip: FT. WRIGHT, KY 41011

Title: MGRM () Delete
Name: KIMBALL FAMILY LIMIT, ED PARTNERSHIP I
Address: 75-655 HALEWILI PL
City-St-Zip: KAILUA KONA, HI 96740

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: JOYCE S. KIMBALL

MGRM

02/20/2008

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