2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000087331

Entity Name: HICKORY 26588, LLC

FILED Jan 23, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O LAIRD A. LILE, P.A.

300 5TH AVENUE SOUTH
3033 RIVIERA DRIVE #104

NAPLES, FL 34103

300 5TH AVENUE SOUTH
SUITE 101, #446
NAPLES, FL 34103

Current Mailing Address: New Mailing Address:

 C/O LAIRD A. LILE, P.A.
 300 5TH AVENUE SOUTH

 3033 RIVIERA DRIVE #104
 SUITE 101, #446

 NAPLES, FL 34103
 NAPLES, FL 34103

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

LILE, LAIRD A 3033 RIVIERA DRIVE SUITE 104 NAPLES, FL 34103 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

ADDITIONS/CHANGES

Title: MGRM () Delete Title: MGRM (X) Change () Addition
Name: SUSAN P. DAVIS, TRUS, TEE OF NAUTICA L TRUST Name: SUSAN P. DAVIS, TRUS, TEE OF MARINER TRUST

Address: C/O LAIRD A. LILE 3033 RIVIERA DRIVE #104 Address: 300 5TH AVENUE SOUTH, SUITE 101, #446

City-St-Zip: NAPLES, FL 34103 City-St-Zip: NAPLES, FL 34103

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: SUSAN P. DAVIS, TRUSTEE OF MARINER TRUST MGRM 01/23/2008