


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 10, 2008 8:00 am
Secretary of State

01-10-2008 90018 034 ***138.75

DOCUMENT # L07000097836
 1. Entity Name
 D.L. HAWKINS EQUINE SERVICES, LLC



Principal Place of Business 2424 S.W. 98TH DRIVE GAINESVILLE, FL 32608	Mailing Address 2424 S.W. 98TH DRIVE GAINESVILLE, FL 32608
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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6. Name and Address of Current Registered Agent

BUTTS, ROBERT P
 5200 S.W. 91ST TERRACE, SUITE 101
 FISHER, BUTTS, SECHREST & WARNER
 GAINESVILLE, FL 32608



01082008 Chg-LLC CR2E083 (12/06)

4. FEI Number 45-0573874	Applied For Not Applicab
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75	Make check payable to: Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
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11. I 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 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 *Dan L. Hawkins*