

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000122962

FILED
Apr 08, 2008
Secretary of State

Entity Name: HOOD APPRAISAL SERVICE, LLC

Current Principal Place of Business:

2604 NAPOLEON BONAPARTE DRIVE
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

2604 NAPOLEON BONAPARTE DRIVE
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 26-1662149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOOD, RICHARD E
2604 NAPOLEON BONAPARTE DRIVE
TALLAHASSEE, FL 32308 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: HOOD, RICHARD E
Address: 2604 NAPOLEON BONAPARTE DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: M () Change (X) Addition
Name: HOOD, MICHELE A
Address: 2604 NAPOLEON BONAPARTE DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

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: RICHARD E HOOD

MGRM

04/08/2008

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