2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

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Entity Name
HAWTHORNE REAL ESTATE, L.C.

Principal Place of Business
S. COLLINS ST
ANT CITY, FL 33566

Mailing Address
102 SOUTH EVERS STREET
SUITE 103
PLANT CITY, FL 33563

01052006No Chg-LLC CR2E083 (11/05)

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4. FEI Number
59-3391053
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

HAWTHORNE, DAVID E
N COLLINS
ANT CITY, FL 33566

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

MANAGING MEMBERS/MANAGERS

	MGRM HAWTHORNE, DAVID E 702 W. REYNOLDS ST. PLANT CITY, FL 33563
	MGRM HAWTHORNE, VICTORIA 702 W. REYNOLDS ST. PLANT CITY, FL 33563

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01/30/06-80083-017 50.00

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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: Victoria Hawthorne 1-18-06 (813)719-3700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #