## 2004 LIMITED LIABILITY COMPANY

#### **ANNUAL REPORT DOCUMENT # M0000001479**

1. Entity Name HAWTHORNE VILLAGE, LLC

Principal Place of Business

245 SAW MILL RIVER ROAD HAWTHORNE, NY 10532

Mailing Address

245 SAW MILL RIVER ROAD HAWTHORNE, NY 10532

# **FILED** Apr 16, 2004 8:00 am Secretary of State

04-16-2004 90418 022 \*\*\*\*50.00

24044529



03042004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number		Applied For
13-4135394		Not Applicable
5. Certificate of Status Desired	\$5.00	Additional

## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

### DO NOT WRITE IN THIS SPACE

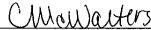
Filing Fee is \$50.00 Due by May 1, 2004		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
<ol><li>The above named entity submits this statement for the purpose of changi- the obligations of registered agent.</li></ol>	ng its registered office or registered agent, or both, in the State of Florida	. I am familiar with, and accept

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	GINSBURG, SAMUEL
STREET ADDRESS	245 SAW MILL RIVER ROAD
CITY-ST-ZIP	HAWTHORNE, NY 10532
TITLE	
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#### DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

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hristme McWalters

314104

Date

Daytime Phone #