


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 07, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M06000005709</b>	
1. Entity Name HOVEN INVESTMENTS, LLC	

Principal Place of Business 4308 ENFIELD CT PALM HARBOR, FL 34685	Mailing Address 4308 ENFIELD CT PALM HARBOR, FL 34685
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**DO NOT WRITE IN THIS SPACE**



01042008No Chg-LLC CR2E083 (12/07)

4. FEI Number NOT APPLICABLE	Applied For <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

HOVEN, THOMAS G  
 4308 ENFIELD CT  
 PALM HARBOR, FL 34685

**DO NOT WRITE IN THIS SPACE**

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**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOVEN, THOMAS G 4308 ENFIELD CT PALM HARBOR, FL 34685
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOVEN, IRENE 4308 ENFIELD CT PALM HARBOR, FL 34685
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 01/08/08-80021-010 143.75

**DO NOT WRITE IN THIS SPACE**

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:** *Thomas G. Hoven* 01/04/2008 (727)945-0472

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #