

2000. UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **MA7000000539**

1. Entity Name
Hooker Homes, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 AUG 31 AM 10:02

Principal Place of Business
**500 Water Street
Jacksonville, FL 32202**

Mailing Address
**500 Water Street
SC-J-160
Jacksonville, FL 32202**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

4. FEI Number
58-1154221

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**C.T. Corporation
1200 South Pine Island Road
Plantation, FL 33324**

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.

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

**FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State**

9. MANAGING MEMBERS/MEMBERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**MGR P. J. AFTOORA
500 WATER STREET
JACKSONVILLE, FL 32202**

**MGR S. A. CROSBY
301 WEST BAY STREET
JACKSONVILLE, FL 32202**

**MGR J. R. EVANS
500 WATER STREET
JACKSONVILLE, FL 32202**

**7000003384347--8
-09/06/00-01108-008
*****50.00**

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.

CSX Realty Development, LLC Sole Member

SIGNATURE: **Patricia J. Aftoora**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Patricia J. Aftoora, Vice-President
Date **4/20/2000**

904-366-4242

CR2E083 (11/99)