

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M97000000539

FILED
Apr 30, 2004
Secretary of State

Entity Name: HOOKER HOMES, LLC

Current Principal Place of Business:

500 WATER STREET
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

500 WATER STREET
J-160
JACKSONVILLE, FL 32202

New Mailing Address:

FEI Number: 58-1154221 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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/MEMBERS:

Title: MGR () Delete
Name: GEIERSBACH, RACHEL E
Address: 500 WATER STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: MGR () Delete
Name: CROSBY, S A
Address: 301 WEST BAY STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: MGR () Delete
Name: EVANS, J R
Address: 500 WATER STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: MGRM (X) Delete
Name: CSX REALTY DEVELOPME, NT, LLC
Address: 500 WATER STREET
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MELTON, DONNA W
Address: 500 WATER STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: BOOR, DAVID A
Address: 500 WATER STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DONNA W. MELTON

MGR

04/30/2004

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