2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000024888

Entity Name: HOOKED ON BOOKS, INC.

KELLER, CATHERINE L

236 UPLAND WAY

WAYNE, PA 19087

Name: Address:

City-St-Zip:

FILED Sep 12, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 81909 OVERSEAS HWY 81909 OVERSEAS HWY ISLAMARODA, FL 33036 ISLAMORADA, FL 33036 US US **Current Mailing Address: New Mailing Address:** 79901 OVERSEAS HWY., #204 ISLAMORADA, FL 33036 FEI Number: 65-0834749 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BOWER, PENNY 81909 OVERSEAS HWY ISLAMORADA, FL 33036 US 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 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BOWER, PENNY Name: Name: 79901 OVERSEAS HWY., #204 Address: Address: City-St-Zip: ISLAMORADA, FL 33036 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BOWER, JAMES Name: 79901 OVERSEAS HWY, #204 Address: Address: ISLAMORADA, FL 33036 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change () Addition KELLER, WILLIAM KELLER, WILLIAM Name: Name: 236 UPLAND WAY 83201 OLD HIGHWAY, #223 Address: Address: City-St-Zip: WAYNE, PA 19087 City-St-Zip: ISLAMORADA, FL 33036 Title: () Delete Title: S/D (X) Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

KELLER, CATHERINE L

ISLAMORADA, FL 33036

83201 OLD HIGHWAY, #223

SIGNATURE: PENNY BOWER P/D 09/12/2008