

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000013560

FILED
Feb 13, 2009
Secretary of State

Entity Name: LEWIS PROPERTIES, LLC

Current Principal Place of Business:

2270 FIRST STREET
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

2270 FIRST STREET
FORT MYERS, FL 33901

New Mailing Address:

FEI Number: 65-1052932 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOP FLORIDA PROPERTIES, LLC
2270 FIRST STREET
FORT MYERS, FL 33901 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/MANAGERS:

Title: MGR () Delete
Name: LEIVERS, VICKI
Address: 2270 FIRST STREET
City-St-Zip: FORT MYERS, FL 33901

Title: MGRM () Delete
Name: MILLERSHIP, MARK ANTHONY
Address: 2270 FIRST STREET
City-St-Zip: FORT MYERS, FL 33901

Title: MGRM () Delete
Name: JACKSON, COLIN HENRY
Address: 2270 FIRST STREET
City-St-Zip: FORT MYERS, FL 33901

Title: MGRM () Delete
Name: JACKSON, LORRANIE
Address: 2270 FIRST STREET
City-St-Zip: FORT MYERS, FL 33901

Title: MGRM () Delete
Name: DORMAYER, DORIT
Address: 2270 FIRST STREET
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES:

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

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

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

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

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

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 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: DORIT DORMAYER

MGRM

02/13/2009

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