

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 13, 2008 08:00 AM
Secretary of State

DOCUMENT # L01000004572
 1. Entity Name
 MARRICK PROPERTIES, L.L.C.



Principal Place of Business Mailing Address
 253 2ND AVE. N. 253 2ND AVE. N.
 ST. PETERSBURG, FL 33701 ST. PETERSBURG, FL 33701

DO NOT WRITE IN THIS SPACE



06092008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 59-3714349	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
 HOE, RICHARD E
 3900 BAYSHORE BLVD NE
 SAINT PETERSBURG, FL 33703

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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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008 In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOE, RICHARD E 253 2ND AVE. N. ST. PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ULRICH, LISA 253 2ND AVE. N. ST. PETERSBURG, FL 33701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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: *Richard E Hoe* RICHARD E HOE JR. 5/23/08 787-822-7500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE 316 Daytime Phone #