


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000005664 1. Entity Name LEISURE PROPERTIES, L.L.C.	
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FILED
Aug 18, 2008 08:00 AM
Secretary of State

Principal Place of Business 2891 SCENIC GULF DRIVE DESTIN, FL 32550	Mailing Address P.O. BOX 6877 MIRAMAR BEACH, FL 32550
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DO NOT WRITE IN THIS SPACE



08072008No Chg-LLC CR2E083 (12/07)

4. FEI Number 59-3725001	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

MCGILL, ROBERT E III
 36008 EMERALD COAST PARKWAY, SUITE 301
 DESTIN, FL

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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 \$538.75
Due by September 12, 2008

U00000957870
 08/18/08-80006-012 538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGR
NAME	THOMPSON, SUZANNE
STREET ADDRESS	PO BOX 6877
CITY-ST-ZIP	DESTIN, FL 32550
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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: *Suzanne Thompson* 8/12/08 (850)269-2038
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #