

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010750

Entity Name: VAN LOON COMMONS, L.L.C.

FILED  
Feb 28, 2009  
Secretary of State

**Current Principal Place of Business:**

8290-201 COLLEGE PKWY  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

8270-201 COLLEGE PARKWAY  
FORT MYERS, FL 33919

**New Mailing Address:**

FEI Number: 65-1135966

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WROTEN, MELVIN O JR.  
4641 PINE LEVEL WAY  
FORT MYERS, FL 33905 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: MGRM ( ) Delete  
Name: WROTEN, MELVIN O JR.  
Address: P.O. BOX 151520  
City-St-Zip: CAPE CORAL, FL 33915

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WROTEN, MELVIN O JR.  
Address: 4641 PINE LEVEL WAY  
City-St-Zip: FORT MYERS, FL 33905

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: MELVIN O. WROTEN, JR.

MGR

02/28/2009

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