2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2009
Secretary of State

DOCUMENT# L03000009424

Entity Name: STRASSER INVESTMENTS PARCEL C, LLC

Current Principal Place of Business:

1042 N US HIGHWAY 1
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

1042 N US HIGHWAY 1
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 65-1181603 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STRASSER, CHARLES L
1042 N US HWY 1
ORMOND BEACH, FL 32174 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:	D	( ) Delete
Name:	STRASSER, CHARLES L	
Address:	1316 JOHN ANDERSON DRIVE	
City-St-Zip:	ORMOND BEACH, FL 32176	
Title:	D	( ) Delete
Name:	DOWST, LEE	
Address:	536 N. HALIFAX AVE #100	
City-St-Zip:	DAYTONA BEACH, FL 32118	
Title:	D	( ) Delete
Name:	STRASSER, SCOTT	
Address:	1042 N US HWY 1	
City-St-Zip:	ORMOND BEACH, FL 32174	
Title:	D	( ) Delete
Name:	MILLER, SANFORD	
Address:	444 SEABREEZE BLVD #1002	
City-St-Zip:	DAYTONA BEACH, FL 32118	
Title:	D	( ) Delete
Name:	COLLYER, BRYAN	
Address:	1042 N US HWY 1	
City-St-Zip:	ORMOND BEACH, FL 32174	
Title:	D	( ) Delete
Name:	DOWST, MARK	
Address:	2050 JOHN ANDERSON DRIVE	
City-St-Zip:	ORMOND BEACH, FL 32174	

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:	
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: CHARLES L.STRASSER D 02/16/2009

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