

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000041479

FILED
Mar 17, 2009
Secretary of State

Entity Name: TURTLE GRASS PROPERTIES, L.L.C.

Current Principal Place of Business:

2039 CENTRE POINTE BLVD., SUITE 201
TALLAHASSEE, FL 32308

New Principal Place of Business:

2039 CENTRE POINTE BLVD., SUITE 203
TALLAHASSEE, FL 32308

Current Mailing Address:

2039 CENTRE POINTE BLVD., SUITE 201
TALLAHASSEE, FL 32308

New Mailing Address:

2039 CENTRE POINTE BLVD., SUITE 203
TALLAHASSEE, FL 32308

FEI Number: 20-1202575

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SULLIVAN, PAUL J
3053 HAWKS GLEN
TALLAHASSEE, FL 32312 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: CAMPBELL, JAMES I IV
Address: 2039 CENTRE POINTE BLVD., SUITE 201
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM () Delete
Name: SULLIVAN, PAUL J
Address: 3053 HAWKS GLENN
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM () Delete
Name: SMITH, CHARLES E
Address: 383 STUART TARTER ROAD
City-St-Zip: OZARK, AL 36360

Title: MGRM () Delete
Name: CAMPBELL, CYNTHIA N
Address: 2039 CENTRE POINTE BLVD., SUITE 201
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM () Delete
Name: SULLIVAN, CINDY D
Address: 3053 HAWKS GLENN
City-St-Zip: TALLAHASSEE, FL 32312

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: PAUL J. SULLIVAN

MGRM

03/17/2009

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