

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000000432

Entity Name: 3602 S HWY 17, LLC

FILED  
May 01, 2009  
Secretary of State

**Current Principal Place of Business:**

6622 EAST BROAD STREET  
SUITE A  
DOUGLASVILLE, GA 30134 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 70  
DOUGLASVILLE, GA 30133 US

**New Mailing Address:**

FEI Number: 20-4031822      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

HUGHES, J. R ESQ.  
220 MCKENZIE AVENUE  
PANAMA CITY, FL 32401 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:           MMEM      ( ) Delete  
Name:           KINGSTON, GEORGE  
Address:       6622 EAST BROAD STREET, SUITE A  
City-St-Zip:   DOUGLASVILLE, GA 30134

**ADDITIONS/CHANGES:**

Title:           MGRM      (X) Change ( ) Addition  
Name:           KINGSTON, GEORGE R  
Address:       POST OFFICE BOX 70  
City-St-Zip:   DOUGLASVILLE, GA 30133

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: GEORGE R. KINGSTON

MGRM

05/01/2009

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