

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000024945

Entity Name: FLORIDA COMMISSARY, LLC

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

7796 IRLO BRONSON HIGHWAY
KISSIMMEE, FL 34747 US

New Principal Place of Business:

7796 W IRLO BRONSON HIGHWAY
KISSIMMEE, FL 34747 US

Current Mailing Address:

308 W. RANDOLPH STREET
SUITE 400
CHICAGO, IL 60606 US

New Mailing Address:

7796 W IRLO BRONSON HIGHWAY
KISSIMMEE, FL 34747 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

APOSTOLOU, JOHN
8069 WHITE CRANE COURT
KISSIMMEE, FL 34747 US

Name and Address of New Registered Agent:

APOSTOLOU, JOHN
7796 W IRLO BRONSON HIGHWAY
KISSIMMEE, FL 34747 US

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:

05/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FLORIDA PROPERTY PARTNERS, LLP
Address: 308 W. RANDOLPH STREET, SUITE 400
City-St-Zip: CHICAGO, IL 60606 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FLORIDA PROPERTY PARTNERS, LLP
Address: 740 N. RUSH STREET, SUITE 400
City-St-Zip: CHICAGO, IL 60611 US

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: JOHN APOSTOLOU

MBR

05/01/2009

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