

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000039104

FILED
Apr 30, 2009
Secretary of State

Entity Name: 12075 LAND INVESTMENTS, LLC

Current Principal Place of Business:

PALMETOT BAY VILLAGE CENTER
18001 OLD CUTLER ROAD, SUITE 370
PALMETTO BAY, FL 33157

New Principal Place of Business:

Current Mailing Address:

PALMETOT BAY VILLAGE CENTER
18001 OLD CUTLER ROAD, SUITE 370
PALMETTO BAY, FL 33157

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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: MGR () Delete
Name: BARED, JOSE I
Address: 18001 OLD CUTLER ROAD, SUITE 370
City-St-Zip: PALMETTO BAY, FL 33157

Title: MGR () Delete
Name: GARRIGO, IVETTE
Address: 18001 OLD CUTLER ROAD, SUITE 370
City-St-Zip: PALMETTO BAY, FL 33157

Title: MGR () Delete
Name: BARED, CARLOS E
Address: 18001 OLD CUTLER ROAD, SUITE 370
City-St-Zip: PALMETTO BAY, FL 33157

Title: MGR () Delete
Name: CARLOS, MAURICE
Address: 18001 OLD CUTLER ROAD, SUITE 370
City-St-Zip: PALMETTO BAY, FL 33157

Title: MGR () Delete
Name: MOLINA, PATRICIA
Address: 18001 OLD CUTLER ROAD, SUITE 370
City-St-Zip: PALMETTO BAY, FL 33157

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: CARLOS BARED

MNG

04/30/2009

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