2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# L08000071628

Entity Name: B.O.D. PROPERTIES, LLC

Current Principal Place of Business:

9601 WEST SAMPLE ROAD
CORAL SPRINGS, FL 33065

New Principal Place of Business:

300 SOUTH PINE ISLAND ROAD
SUITE 300
PLANTATION, FL 33324

Current Mailing Address:

9601 WEST SAMPLE ROAD
CORAL SPRINGS, FL 33065

New Mailing Address:

P.O. BOX 9896
CORAL SPRINGS, FL 33075

FEI Number: 26-3195901 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAMMER, HOWARD
300 S. PINE ISLAND RD., SUITE 300
PLANTATION, FL 33324 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: DEPENBROCK, EDWARD D
Address: 9601 WEST SAMPLE ROAD
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGRM ( ) Delete
Name: DEPENBROCK, OLGA
Address: 9601 WEST SAMPLE ROAD
City-St-Zip: CORAL SPRINGS, FL 33065

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: DEPENBROCK, EDWARD B
Address: P.O. BOX 9896
City-St-Zip: CORAL SPRINGS, FL 33075

Title: MGRM (X) Change ( ) Addition
Name: DEPENBROCK, OLGA
Address: P.O. BOX 9896
City-St-Zip: CORAL SPRINGS, FL 33075

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: EDWARD B. DEPENBROCK MGRM 04/28/2009

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