

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000109691

**FILED**  
**Apr 21, 2009**  
**Secretary of State**

**Entity Name:** MT DORA SHORE ACRES PROP LLC

**Current Principal Place of Business:**

1480 SHERIDAN ST  
8  
HOLLYWOOD, FL 33020

**New Principal Place of Business:**

**Current Mailing Address:**

1480 SHERIDAN ST  
8  
HOLLYWOOD, FL 33020

**New Mailing Address:**

**FEI Number:** 26-3803840

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCGONIGLE, J  
7027 W BROWARD BLVD  
280  
PLANTATION, FL 33317 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: GLASER, DONALD A  
Address: 3531 NW 23 PL  
City-St-Zip: GAINESVILLE, FL 32605 US

Title: MGRM ( ) Delete  
Name: JACKETT, MARY  
Address: 1480 SHERIDAN ST #8  
City-St-Zip: HOLLYWOOD, FL 33020 US

**ADDITIONS/CHANGES:**

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: M JACKETT

MGR

04/21/2009

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