

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000039768

FILED  
Jul 03, 2008  
Secretary of State

Entity Name: BY LAW PROPERTIES, LLC

**Current Principal Place of Business:**

1800 SOUTH DIVISION AVE  
ORLANDO, FL 32805 US

**New Principal Place of Business:**

**Current Mailing Address:**

3240 TOURAINE AVE  
ORLANDO, FL 32812 US

**New Mailing Address:**

FEI Number: 20-4723648      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:**

A1A REGISTERED AGENT INC.  
5647 110TH AVE. NORTH  
ROYAL PALM BEACH, FL 334110000 US

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

LAW, JOHN  
3240 TOURAINE AVE.  
ORLANDO, FL 328126605 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: JOHN LAW

07/03/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LAW, JOHN  
Address: 3240 TOURAINE AVE  
City-St-Zip: ORLANDO, FL 32812 US

Title: MGRM ( ) Delete  
Name: LAW, WENDY S  
Address: 3240 TOURAINE AVE  
City-St-Zip: ORLANDO, FL 32812 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: JOHN LAW

MGRM

07/03/2008

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