

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L98000000784

**FILED**  
**Feb 28, 2013**  
**Secretary of State**  
**CC6112190129**

**Entity Name:** MARSHALL FAMILY PROPERTIES, L.C.

**Current Principal Place of Business:**

C/O STEWART A. MARSHALL, III  
1516 E. HILLCREST STREET, SUITE 210  
ORLANDO, FL 32803

**Current Mailing Address:**

C/O STEWART A. MARSHALL, III  
1516 E. HILLCREST STREET, SUITE 210  
ORLANDO, FL 32803

**FEI Number: 59-3570503**

**Certificate of Status Desired: No**

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

MITCHELL, CHARLES JJR  
1516 E. HILLCREST STREET  
SUITE 210  
ORLANDO, FL 32803 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name GOGGENS MARSHALL EST, MARY JUANITA  
Address 1516 E HILLCREST ST SUITE 210  
City-State-Zip: ORLANDO FL 32803

Title MGRM  
Name MARSHALL, STEWART AIII  
Address 1516 E. HILLCREST STREET, SUITE 210  
City-State-Zip: ORLANDO FL 32803

Title MGRM  
Name MARSHALL BONHAM, BETSY RIVES  
Address 495 COURT STREET  
City-State-Zip: ABINGDON VA 24210

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: STEWART A MARSHALL III**

**MGRM**

**02/28/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date