

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000001130

**FILED**  
**Sep 21, 2004**  
**Secretary of State**

**Entity Name:** SOUTHERN FAMILY PROPERTIES, LLC

**Current Principal Place of Business:**

4125 FOREST DRIVE  
MULBERRY, FL 33860

**New Principal Place of Business:**

**Current Mailing Address:**

4125 FOREST DRIVE  
MULBERRY, FL 33860

**New Mailing Address:**

**FEI Number:** 59-3642923

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DELLAPORTA, KARI  
4125 FOREST DRIVE  
MULBERRY, FL 33860 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: PDQS, INC.,  
Address: 4125 FOREST DRIVE  
City-St-Zip: MULBERRY, FL 33860

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KARI DELLAPORTA

PRES

09/21/2004

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