

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000008845

**FILED**  
**Apr 28, 2009**  
**Secretary of State**

**Entity Name:** FLORIDA FLYWAY PROPERTIES, LLC

**Current Principal Place of Business:**

C/O JEFFERY ETHERTON, MD  
106 MILFORD ST., SUITE 605  
SALISBURY, MD 21804

**New Principal Place of Business:**

**Current Mailing Address:**

C/O JEFFERY ETHERTON, MD  
106 MILFORD ST., SUITE 605  
SALISBURY, MD 21804

**New Mailing Address:**

FEI Number: 58-2588828

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WALTER H. MESSICK, P.A.  
1900 CORPORATE BLVD, SUITE 305 WEST  
BOCA RATON, FL 33431 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: ETHERTON, JEFFREY M.D.  
Address: 106 MILFORD ST., STE 605  
City-St-Zip: SALISBURY, MD 21804

**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 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: JEFFREY ETHERTON, M.D.

MGRM

04/28/2009

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