

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000011384

Entity Name: FIELD PROPERTIES, LLC

FILED
Apr 02, 2009
Secretary of State

Current Principal Place of Business:

4501 126TH AVENUE NORTH
CLEARWATER, FL 33762

New Principal Place of Business:

Current Mailing Address:

4501 126TH AVE. N.
CLEARWATER, FL 33762

New Mailing Address:

FEI Number: 59-3669706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WATTS, STEPHEN G P.A.
809 DRUID RD.
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

WATTS, STEPHEN G P.A.
1446 COURT STREET
CLEARWATER, FL 33756 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: STEPHEN G. WATTS, ESQ.

04/02/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: O'BRIEN, CHRISTOPHER M
Address: 4501 126TH AVE. N.
City-St-Zip: CLEARWATER, FL 33762

Title: MGR () Delete
Name: BROOKFIELD, IRENE
Address: 4501 126TH AVE. N.
City-St-Zip: CLEARWATER, FL 33762

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BROOKFIELD, IRENE
Address: 4501 126TH AVE. N.
City-St-Zip: CLEARWATER, FL 33762

Title: MGR (X) Change () Addition
Name: OBRIEN, CHRISTOPHER M
Address: 4501 126TH AVE. N.
City-St-Zip: CLEARWATER, FL 33762

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: IRENE BROOKFIELD

MGR

04/02/2009

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