

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000007122

Entity Name: L & L PROPERTIES, LLC

FILED
Feb 15, 2008
Secretary of State

Current Principal Place of Business:

4601 N ARMENIA AVE
TAMPA, FL 33603

New Principal Place of Business:

4601 N. ARMENIA AVE
TAMPA, FL 33603

Current Mailing Address:

4601 N ARMENIA AVE
TAMPA, FL 33603

New Mailing Address:

4601 N. ARMENIA AVE
TAMPA, FL 33603

FEI Number: 59-3721607

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LORENZO, GEORGE A
4601 N. ARMENIA AVENUE
TAMPA, FL 33603 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: LORENZO, NANCY A
Address: 4601 N ARMENIA AVE
City-St-Zip: TAMPA, FL 33603

Title: MGRM () Delete
Name: LORENZO, GEORGE A
Address: 4601 N ARMENIA AVE
City-St-Zip: TAMPA, FL 33603

Title: MGR () Delete
Name: ROSALES-LORENZO, ISNEL TREAS
Address: 4601 N. ARMENIA AVENUE
City-St-Zip: TAMPA, FL 33603

ADDITIONS/CHANGES:

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

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: GEORGE A. LORENZO

MGRM

02/15/2008

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