

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000013256

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: MAGNOLIA POINT VENTURE, LLC

**Current Principal Place of Business:**

13400 SUTTON PK DR S #1402  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

13400 SUTTON PK DR S #1402  
JACKSONVILLE, FL 32224

**New Mailing Address:**

FEI Number: 59-3736344      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MONTGOMERY, MITCHELL R  
13400 SUTTON PK DR S #1402  
JACKSONVILLE, FL 32224    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: MONTGOMERY LAND COMPANY  
Address: 13400 SUTTON PK DR S #1402  
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM ( ) Delete  
Name: MHK OF VOLUSIA COUNTY, INC.  
Address: 2359 BEVILLE ROAD  
City-St-Zip: DAYTONA BEACH, FL 32119

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: MHK OF VOLUSIA COUNTY, INC.  
Address: 2379 BEVILLE ROAD  
City-St-Zip: DAYTONA BEACH, FL 32119

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: MITCHELL R. MONTGOMERY

MGRM

04/14/2009

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