

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000003960

FILED  
May 02, 2008  
Secretary of State

Entity Name: VALENTINE PROPERTIES, L.L.C.

**Current Principal Place of Business:**

1574 SE CHIFFON AVE  
PORT ST LUCIE, FL 34952

**New Principal Place of Business:**

**Current Mailing Address:**

1574 SE CHIFFON AVE  
PORT ST LUCIE, FL 34952

**New Mailing Address:**

FEI Number: 01-0723878      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

DE SANTIS, PETER  
1574 SE CHITTON AVE  
PORT SAINT LUCIE, FL 34952      US

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

DE SANTIS, PETER  
1574 SE CHIFFON AVE  
PORT SAINT LUCIE, FL 34952      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: \_\_\_\_\_

05/02/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: DESANTIS, PETER  
Address: 1574 SE CHIFFON AVE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change      ( ) Addition  
Name: DESANTIS, PETER  
Address: 1574 SE CHIFFON AVE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

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: PETER DESANTIS

MGRM

05/02/2008

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