

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000005039

FILED
Apr 25, 2008
Secretary of State

Entity Name: SOUTHERNMOST PROPERTIES, LLC

Current Principal Place of Business:

830 NE 28TH ST
#400
OCALA, FL 3447

New Principal Place of Business:

830 NE 28TH ST
BLDG. #400
OCALA, FL 34470

Current Mailing Address:

P.O. BOX 4337
OCALA, FL 34478

New Mailing Address:

FEI Number: 30-0076315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CATES, PAUL J
3001 SW 24TH AVE.
#301
OCALA, FL 34474 US

Name and Address of New Registered Agent:

CATES, HELEN M
830 NE 28TH STREET
BLDG. #400
OCALA, FL 34470 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: HELEN M. CATES

04/25/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: SECT () Delete
Name: CATES, PAUL J
Address: 3001 SW 24TH AVE #301
City-St-Zip: OCALA, FL 34474

Title: PRES () Delete
Name: MOORE, ANTHONY R
Address: 1831 S.E. 38TH COURT
City-St-Zip: OCALA, FL 34471

Title: VP () Delete
Name: MOORE, MONICA R
Address: 1831 S.E. 38TH COURT
City-St-Zip: OCALA, FL 34471

Title: TRES () Delete
Name: CATES, HELEN M
Address: 3001 SW 24TH AVE #301
City-St-Zip: OCALA, FL 34474

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:

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: HELEN M. CATES

TRES

04/25/2008

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