

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008756

FILED
Jan 15, 2009
Secretary of State

Entity Name: ASH PROPERTIES OF TALLAHASSEE, LLC

Current Principal Place of Business:

207 WEST PARK AVENUE, SUITE B
TALLAHASSEE, FL 32301 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1874
TALLAHASSEE, FL 32302 US

New Mailing Address:

FEI Number: 16-1624498 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHIRLEY, M. SCOTT
207 WEST PARK AVENUE, SUITE B
TALLAHASSEE, FL 32301 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: MGR () Delete
Name: ARD, SAMUEL J
Address: 207 WEST PARK AVENUE, SUITE B
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: MGRM () Delete
Name: SHIRLEY, SCOTT
Address: 207 WEST PARK AVENUE, SUITE B
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: MGRM () Delete
Name: HARTMAN, DANIEL W
Address: 207 WEST PARK AVENUE, SUITE B
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: MGRM () Delete
Name: HOUGH, NANCY
Address: 207 WEST PARK AVENUE, SUITE B
City-St-Zip: TALLAHASSEE, FL 32301 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ARD, SAMUAL J
Address: 207 WEST PARK AVENUE, SUITE B
City-St-Zip: TALLAHASSEE, FL 32301 US

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: SCOTT SHIRLEY

MGR

01/15/2009

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