2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000010818

Entity Name: MICCO PARK, LLC

FILED Mar 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1477 BILTMORE DRIVE ATLANTA, GA 30329 **Current Mailing Address: New Mailing Address:** 1477 BILTMORE DRIVE ATLANTA, GA 30329 FEI Number: 81-0556415 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DRIVE, SUITE 4 WESTON, FL 33331 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: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete GREENE, JACK Name: Name: 145 BELMONT TRACE Address: Address: City-St-Zip: ATLANTA, GA 30328 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition GREENE, DAVID Name: GREENE, DAVID Name: Address: 1147 BILTMORE DR Address: 1477 BILTMORE DR City-St-Zip: ATLANTA, GA 30329 City-St-Zip: ATLANTA, GA 30329 Title: MGRM () Delete Title: () Change () Addition GREENE, LALA Name: Name: Address: 145 BELMONT TRACE Address: City-St-Zip: ATLANTA, GA 30329 City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: GREENE, KERRY Name: GREENE, KERRY Address: 1147 BILTMORE DR Address: 1477 BILTMORE DR City-St-Zip: ATLANTA, GA 30329 City-St-Zip: ATLANTA, GA 30329 Title: MGRM () Delete Title: () Change () Addition KARLIN, ANN GREENE Name: Name: 300 NORTHLAND RIDGE CT Address: Address: City-St-Zip: ATLANTA, GA 30342 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition KARLIN, MICHAEL Name: Name: Address: 300 NORTHLAND RIDGE CT Address: ATLANTA, GA 30342 City-St-Zip: 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: DAVID GREENE MGR 03/02/2009