## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000012367

FILED Jul 14, 2009 Secretary of State

Entity Name: COFFMAN, COLEMAN, ANDREWS & GROGAN PROPERTIES, L.L.C.

Current Principal Place of Business:			New Principal Place of Business:	
800 W MOI IACKSON	NROE ST VILLE, FL 32202	US	3212 SHADOW CREE JACKSONVILLE, FL	
Current Mailing Address:			New Mailing Address:	
PO BOX 40089 IACKSONVILLE, FL 32203 US			3212 SHADOW CREEK ROAD JACKSONVILLE, FL 32226 US	
n accordanc	ce with s. 607.193(2)(b)	), F.S., the limited liability company did	· · · · · · · · · · · · · · · · · · ·	
vame and	Address of Curre	nt Registered Agent:	Name and Address of	of New Registered Agent:
COLEMAN, PATRICK D 300 W MONROE ST IACKSONVILLE, FL 32202 US				
	named entity subm of Florida.	its this statement for the purpose of	of changing its registere	d office or registered agent, or both,
SIGNATUR	RE:			
	Electronic Sig	nature of Registered Agent		Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
itle: lame: ddress: city-St-Zip:	MGRM ( ) Delet COLEMAN, PATRICK 800 W MONROE ST JACKSONVILLE, FL	D	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
ītle: lame: \ddress: كity-St-Zip:	MGRM () Delete ANDREWS, WIILIAM 800 W MONROE ST JACKSONVILLE, FL	Н	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
itle: lame: lddress: Sity-St-Zip:	MGRM ( ) Delete GROGAN, MICHAEL I 800 W MONROE ST JACKSONVILLE, FL	(	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
itle: lame: lddress: city-St-Zip:	MGRM ( ) Delet HOLSHOUSER, ERIC 800 W MONROE ST JACKSONVILLE, FL	J	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
ītle: lame: \ddress: City-St-Zip:	MGRM ( ) Delett PIENDERGAST, MICH 800 WEST MONROE JACKSONVILLE, FL	HAEL G ST	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
ïtle: lame: \ddress: City-St-Zip:	MGRM ( ) Delete RIEGEL, ROBERT G 800 W MONROE ST JACKSONVILLE, FL	JR	Title: Name: Address: City-St-Zip:	() Change () Addition

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: ERIC J. HOLSHOUSER MGRM 07/14/2009