

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000013227

FILED
Jan 20, 2009
Secretary of State

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

Current Principal Place of Business:

1911 4TH STREET WEST
PALMETTO, FL 34221

New Principal Place of Business:

1706 8TH AVENUE W
PALMETTO, FL 34221

Current Mailing Address:

P. O. BOX 908
PALMETTO, FL 34220

New Mailing Address:

FEI Number: 36-4500505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARNADORE, RAYMOND E
1911 4TH STREET WEST
PALMETTO, FL 34221 US

Name and Address of New Registered Agent:

VARNADORE, RAYMOND E
1706 8TH AVENUE W
PALMETTO, FL 34221 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:

01/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: VARNADORE, RAYMOND E
Address: 1911 4TH STREET WEST
City-St-Zip: PALMETTO, FL 34221

Title: MGR () Delete
Name: VARNADORE, BEVERLY G
Address: 1911 4TH STREET WEST
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VARNADORE, RAYMOND E
Address: 1706 8TH AVENUE W
City-St-Zip: PALMETTO, FL 34221

Title: MGR (X) Change () Addition
Name: VARNADORE, BEVERLY G
Address: 1706 8TH AVENUE W
City-St-Zip: PALMETTO, FL 34221

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: RAYMOND E. VARNADORE

MGR

01/20/2009

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