

# **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000014427

**FILED**  
**Feb 07, 2007**  
**Secretary of State**

**Entity Name:** BENT PINE PROPERTIES, LLC

**Current Principal Place of Business:**

8377 SEMINOLE BLVD.  
SEMINOLE, FL

**New Principal Place of Business:**

8377 SEMINOLE BLVD.  
SEMINOLE, FL 33772 US

**Current Mailing Address:**

P.O. BOX 13002  
SAINT PETERSBURG, FL 33733

**New Mailing Address:**

P.O. BOX 13002  
SAINT PETERSBURG, FL 33733 US

**FEI Number:** 61-1436838

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROBINETTE, TIM  
10821 EARHART DR.  
NEW PORT RICHEY, FL 34654 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: MUTUAL REAL ESTATE,  
Address: 8377 SEMINOLE BLVD  
City-St-Zip: SEMINOLE, FL US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS CALHOUN AS PRES. MUTUAL REAL ESTATE MGR

02/07/2007

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