

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000028306

FILED
Apr 15, 2009
Secretary of State

Entity Name: WINTER QUARTERS PROPERTIES, LLC

Current Principal Place of Business:

10600 ORANGE AVENUE
ORLANDO, FL 32824

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 55
ORLANDO, FL 32802

New Mailing Address:

FEI Number: 11-3659537

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRATES, JAY
10600 ORANGE AVENUE
ORLANDO, FL 32824 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: MGRM () Delete
Name: STRATES, E. JAMES
Address: 10600 ORANGE AVE.
City-St-Zip: ORLANDO, FL 32824

Title: MGRM () Delete
Name: STRATES, PHYLLIS R
Address: 10600 ORANGE AVENUE
City-St-Zip: ORLANDO, FL 32824

Title: () Delete
Name:
Address:
City-St-Zip:

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City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: E. JAMES STRATES REVOCABLE TRUST
Address: 10600 S. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32824

Title: MGRM (X) Change () Addition
Name: PHYLLIS R. STRATES REVOCABLE TRUST
Address: 10600 S. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32824

Title: MGRM () Change (X) Addition
Name: JOHN E. STRATES 2005 DYNASTY TRUST
Address: 10600 S. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32824

Title: MGRM () Change (X) Addition
Name: JAMES E. STRATES 2005 DYNASTY TRUST
Address: 10600 S. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32824

Title: MGRM () Change (X) Addition
Name: SIBYL STRATES DOREMUS 2005 DYNASTY TRUST
Address: 10600 S. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32824

Title: MGRM () Change (X) Addition
Name: SUSAN STRATES MAGID 2005 DYNASTY TRUST
Address: 10600 S. ORANGE AVE.
City-St-Zip: ORLANDO, FL 32824

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: E. JAMES STRATES

MGRM

04/15/2009

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