

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029122

FILED
Mar 10, 2009
Secretary of State

Entity Name: FLORIDA PROPERTY CLAIMS, LIMITED LIABILITY COMPANY

Current Principal Place of Business:

3845 CANDIA AVE
NORTH PORT, FL 34286 US

New Principal Place of Business:

27455 OBIDOS DRIVE
PUNTA GORDA, FL 33982 US

Current Mailing Address:

PO BOX 494349
PORT CHARLOTTE, FL 33949

New Mailing Address:

FEI Number: 16-1638845 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DAWSON, ROBERT A
3845 CANDIA AVE
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

DAWSON, ROBERT A
27455 OBIDOS DRIVE
PUNTA GORDA, FL 33982 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:

03/10/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: DAWSON, ROBERT A
Address: 3845 CANDIA AVE
City-St-Zip: NORTH PORT, FL 34286

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DAWSON, ROBERT A
Address: 27455 OBIDOS DRIVE
City-St-Zip: PUNTA GORDA, FL 33982

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: ROBERT DAWSON

MGR

03/10/2009

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