

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000031215

Entity Name: INFINITE PROPERTIES, LLC

FILED
May 19, 2008
Secretary of State

Current Principal Place of Business:

7001 SW 24TH AVENUE
GAINESVILLE, FL 32607

New Principal Place of Business:

Current Mailing Address:

7001 SW 24TH AVENUE
GAINESVILLE, FL 32607

New Mailing Address:

FEI Number: 02-0662325 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

COOK, DARIN R
7001 SW 24TH AVENUE
GAINESVILLE, FL 32607 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BLASER, RICHARD S
Address: 10104 SW 17TH PLACE
City-St-Zip: GAINESVILLE, FL 32607

Title: MGRM () Delete
Name: COOK, DARIN R
Address: 5724 NW 16TH LANE
City-St-Zip: GAINESVILLE, FL 32605

Title: MGRM () Delete
Name: MCCULLOUGH, MARTHA
Address: 3426 NW 40TH STREET
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES:

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

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

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

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: RICHARD BLASER

MGRM

05/19/2008

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