

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000000187

**FILED**  
**Mar 05, 2009**  
**Secretary of State**

**Entity Name:** CLARKTON PROPERTIES, L.L.C.

**Current Principal Place of Business:**

1201 WESTFIELD DR.  
FT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

1201 WESTFIELD DR.  
FT MYERS, FL 33919

**New Mailing Address:**

FEI Number: 02-0661934

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WANDERON, THOMAS EA  
809 WALKERBILT ROAD  
NAPLES, FL 34110 US

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

WANDERON, THOMAS EA  
3365 WOODS EDGE CIRCLE  
SUITE 104  
BONITA SPRINGS, FL 34134 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

03/05/2009

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SANDS, PAUL A  
Address: 1201 WESTFIELD DR.  
City-St-Zip: FT MYERS, FL 33919

**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 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: PAUL A. SANDS

MGR

03/05/2009

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