

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000002965

FILED  
Apr 03, 2009  
Secretary of State

**Entity Name:** CONNER FAMILY PROPERTIES, LLC

**Current Principal Place of Business:**

5379 HUNTERS LAKE ROAD  
#2  
SPRING HILL, FL 34606

**New Principal Place of Business:**

**Current Mailing Address:**

5379 HUNTERS LAKE ROAD  
#2  
SPRING HILL, FL 34606

**New Mailing Address:**

**FEI Number:** 16-1652336

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONNER, MICHAEL D  
5379 HUNTERS LAKE ROAD  
#2  
SPRING HILL, FL 34606 US

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

CONNER, MICHAEL D MGRM  
5379 HUNTERS LAKE ROAD  
#2  
SPRING HILL, FL 34606 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: MICHAEL D. CONNER

04/03/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CONNER, MICHAEL D  
Address: 5379 HUNTERS LAKE ROAD #2  
City-St-Zip: SPRING HILL, FL 34606

Title: MGRM ( ) Delete  
Name: CONNER, THELMA T  
Address: 5379 HUNTERS LAKE ROAD #2  
City-St-Zip: SPRING HILL, FL 34606

**ADDITIONS/CHANGES:**

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: MICHAEL D. CONNER

MGRM

04/03/2009

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