## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L03000012693** 

1. Entity Name
COCONUT GROVE PROPERTIES, LLC



FILED Mar 10, 2008 08:00 AN Secretary of State

Fee Required

Daytime Phone #

Principal Place of Business

3300 UNIVERSITY BLVD., SUITE 218 WINTER PARK, FL 32792

Mailing Address

3300 UNIVERSITY BLVD., SUITE 218 WINTER PARK, FL 32792



DO NOT WRITE IN THIS SPACE

02122008No Chg-LLC CR2E083 (12/07)

4. FEI Number		Applied For
	 	Not Applica
5. Certificate of Status Desired	\$5.00	Additional

6. Name and Address of Current Registered Agent

HEEKIN, JAMES F JR. 215 NORTH EOLA DRIVE ORLANDO, FL 32801

## DO NOT WRITE IN THIS SPACE

the obligat	ions of registered agent.			
SIGNATURE.	Signature, typed or printed name of registered agent and title it applicable.	AVVII.		
	Signature, typed or printed name or registered agent and title it applicable.	(NOTE: Registered Agent signature required when reinstating)	OATE	
FILE After May	NOWIII FEE IS \$138.75 1, 2008 Fee will be \$538.75			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME	MGRM HEAVENER, JAMES W			
STREET ADDRESS	3300 UNIVERSITY BLVD #218			
CITY-ST-ZIP	WINTER PARK, FL 32792	1	Hnanange raes	
TITLE NAME STREET ADDRESS			000000851365 03/25/08-80036-020 138.75	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information inclicated on this report is true and accurate and that my 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.				

TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

8. 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. I am familiar with, and accept