2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040979

Entity Name: GREAT NORTHWEST PROPERTIES, LLC

KNOCKNACREE HOUSE DALKEY

City-St-Zip: COUNTY DUBLIN, NA IRELAND

Address:

FILED Apr 08, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
	STAL LAKE DR BEACH, FL 32					
Current Mailing Address:			New Mailing Address:			
	STAL LAKE DR BEACH, FL 32					
FEI Number:	20-0655979	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
2051 CRYS	ATTHEW R STAL LAKE DR BEACH, FL 32					
The above in the State		ubmits this statement for the p	urpose of changing i	ts registered of	fice or registered agent, or both	
SIGNATUR	RE:					
	Electroni	c Signature of Registered Age	nt		Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/0	ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	HAGEN, MATTH 2051 CRYSTAL		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	MGR () FAVRE, FORD F 3896 INDIAN TR DESTIN, FL 325	AIL	Title: Name: Address: City-St-Zip:	MGR (X) FAVRE, FORD F 303 HAWK DRIV SLIDELL, LA 70	/E	
Title: Name: Address: City-St-Zip:	COURTNEY, AL 56 CORTE PALM		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title:	MGR ()	Delete	Title:	()	Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: MATTHEW HAGEN MGRM 04/08/2009