

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000023386

**FILED**  
**Feb 02, 2010**  
**Secretary of State**

**Entity Name:** SOLUTION PROPERTIES, LLC

**Current Principal Place of Business:**

2900 E. ROBINSON STREET  
ORLANDO, FL 32803 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 536934  
ORLANDO, FL 328536934 US

**New Mailing Address:**

**FEI Number:** 20-0909938

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SOLUTION PROPERTY, LLC  
2900 E ROBINSON STREET  
ORLANDO, FL 32803 US

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

BOUGHTER, TAMARA S  
2900 E ROBINSON STREET  
ORLANDO, FL 32803 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: TAMMY BOUGHTER

02/02/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MEAD, LONNY A MR  
Address: 1832 WINDING OAKS DRIVE  
City-St-Zip: ORLANDO, FL 32825 US

Title: MGRM  
Name: WALKER, CHARLES C MR  
Address: 13849 BLUEBIRD POND RD.  
City-St-Zip: WINDEMER, FL 34786 US

Title: MGRM  
Name: LOTT, JAMES E MR  
Address: 453 KEHOE BLVD  
City-St-Zip: ORLANDO, FL 32825 US

Title: MGRM  
Name: LILLY, MARVIN A MR  
Address: 5565 FLORENCE HARBOR  
City-St-Zip: ORLANDO, FL 32829 US

I hereby 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: JAMES E LOTT JR

MGRM

02/02/2010

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