## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024452

Entity Name: WHITECAP PROPERTIES, LLC

FILED Apr 08, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5871 GULF OF MEXICO DRIVE 1626 RINGLING BLVD LONGBOAT KEY, FL 34228

500

SARASOTA, FL 34236 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 10210

FORT SMITH, AR 72917 US

FEI Number: 20-2461151 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PALMER, CHARLES G 5871 GULF OF MEXICO DRIVE LONGBOAT KEY, FL 34228

PALMER, CHARLES G 1626 RINGLING BLVD 500

SARASOTA, FL 34217 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: 04/08/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM ( ) Delete Title: () Change () Addition

CHARLES PALMER INTER VIVOS TRUST Name: Name: Address: P.O. BOX 10210 Address: City-St-Zip: FORT SMITH, AR 72917 US City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

Name: ALFORD, JOHN D Name: Address: P.O. BOX 10210 Address: City-St-Zip: FORT SMITH, AR 72917 US 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: CHARLES PALMER INTER VIVOS TRUST **MGRM** 04/08/2009