

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024759

Entity Name: PROMISED VILLAGES, LLC

FILED  
Apr 27, 2009  
Secretary of State

## Current Principal Place of Business:

1503 SW FIRST AVE  
OCALA, FL 34474

## New Principal Place of Business:

2237 SW 19TH AVE ST, STE 101  
OCALA, FL 34471

## Current Mailing Address:

1503 SW FIRST AVE  
OCALA, FL 34474

## New Mailing Address:

2237 SW 19TH AVE ST, STE 101  
OCALA, FL 34471

FEI Number: 42-1624505

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KIM, LANCE Y  
1503 S.W. 1ST AVENUE  
OCALA, FL 34474 US

## Name and Address of New Registered Agent:

KIM, LANCE Y  
2237 SW 19TH AVE ST, STE 101  
OCALA, FL 34471 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:

04/27/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: KIM, LANCE Y  
Address: 1503 SW 1ST AVE  
City-St-Zip: Ocala, FL 34474

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: KIM, LANCE Y  
Address: 2237 SW 19TH AVE ST, STE 101  
City-St-Zip: Ocala, FL 34471

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: DR LANCE Y KIM

MGRM

04/27/2009

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