## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000030460

Title:

Name:

Address:

City-St-Zip:

MGRM

( ) Delete

PEMBROKE PINES, FL 33025

BIENVENU, GLORIA C

611 S.W. 100TH AVE.

Entity Name: DOT C PROPERTIES, LLC

FILED Feb 02, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4400 TAYLOR STREET 5198 SW 87 AVE HOLLYWOOD, FL 33021 COOPER CITY, FL 33328 **Current Mailing Address: New Mailing Address:** 4400 TAYLOR STREET 5198 SW 87 AVE HOLLYWOOD, FL 33021 COOPER CITY, FL 33328 FEI Number: 61-1462185 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: CLARK, HOWARD P JR. CLARK, HOWARD P JR. 4400 TAYLOR STREET 5198 SW 87 AVE HOLLYWOOD, FL 33021 US COOPER CITY, FL 33328 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: 02/02/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete CLARK JR., HOWARD P Name: Name: Address: 2425 CHERI LANE Address: City-St-Zip: PEMBROKE PARK, FL 33009 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: EBERLY, CHERI C Name: Address: 5198 SW 87 AVE Address: City-St-Zip: COOPER CITY, FL 33328 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition CHOPSKI, JOYCE C Name: Name: Address: 3751 N. 55TH AVE Address: City-St-Zip: HOLLYWOOD, FL 33021 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.

Title:

Name:

Address:

City-St-Zip:

() Change () Addition

SIGNATURE: CHERI C EBERLY MGRN 02/02/2009