

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000030564

FILED
Sep 09, 2009
Secretary of State

Entity Name: LLE SOUTHWEST PROPERTIES, LLC.

Current Principal Place of Business:

10613 HATTERAS DRIVE
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

10613 HATTERAS DRIVE
TAMPA, FL 33615

New Mailing Address:

FEI Number: 61-1470083 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MEKOWULU, EMMANUEL I
10613 HATTERAS DRIVE
TAMPA, FL 33615 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MEKOWULU, EMMANUEL I
Address: 10613 HATTERAS DRIVE
City-St-Zip: TAMPA, FL 33615

Title: MGRM () Delete
Name: EGBUJI OBI, LEO C
Address: 807 SHERWOOD DRIVE N.E.
City-St-Zip: BELOIT, WI 53511

Title: MGRM () Delete
Name: OKONKWO, LOUIS
Address: 728 MIRADO LANE
City-St-Zip: PORT CHARLOTTE, FL 33948

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: EMMANUEL MEKOWULU

MGR

09/09/2009

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