

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000047210

Entity Name: 1ST U.S. PROPERTIES, LLC

FILED
May 05, 2008
Secretary of State

Current Principal Place of Business:

4133 TAMIAMI TRAIL EAST
NAPLES, FL 34112

New Principal Place of Business:

Current Mailing Address:

PO BOX 19638
PARADISE, NV 89132

New Mailing Address:

FEI Number: 77-0638908 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

COLTON, AUTUMN J RN
4133 TAMIAMI TRAIL EAST
NAPLES, FL 34112 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: COLTON, AUTUMN
Address: 4133 TAMIAMI TRAIL EAST
City-St-Zip: NAPLES, FL 34112

Title: MGRM () Delete
Name: WOLF, HANK
Address: 4133 TAMIAMI TRAIL EAST
City-St-Zip: NAPLES, FL 34112

Title: MGRM () Delete
Name: O'MAN, B. THOMAS
Address: 4133 TAMIAMI TRAIL EAST
City-St-Zip: NAPLES, FL 34112

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: B. THOMAS O'MAN

MGRM

05/05/2008

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