

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000049264

FILED
Apr 30, 2009
Secretary of State

Entity Name: FLORIDA GOLD PROPERTY MANAGEMENT, LLC

Current Principal Place of Business:

PO BOX 470096,
CELEBRATION, FL 34747

New Principal Place of Business:

713 CELEBRATION AVENUE
CELEBRATION, FL 34747

Current Mailing Address:

PO BOX 470096
CELEBRATION, FL 34747

New Mailing Address:

FEI Number: 20-2426789 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

THOMAS MCMAHON
P.O.BOX 470096
CELEBRATION, FL 34747 US

Name and Address of New Registered Agent:

THOMAS MCMAHON
2877 BLOOMING ALAMANDA LOOP
KISSIMMEE, FL 34747 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: CHRISTINE GRAY

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MCMAHON, MAURA T
Address: 2877 BLOOMING ALAMANDA LOOP
City-St-Zip: KISSIMMEE, FL 34747

Title: M () Delete
Name: MCMAHON, THOMAS B
Address: 2877 BLOOMING ALAMANDA LOOP
City-St-Zip: KISSIMMEE, FL 34747

Title: M () Delete
Name: GRAY, CHRISTINE
Address: 2877 BLOOMING ALAMANDA LOOP
City-St-Zip: KISSIMMEE, FL 34747

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: MCMAHON, THOMAS B
Address: 2877 BLOOMING ALAMANDA LOOP
City-St-Zip: KISSIMMEE, FL 34747

Title: MGR (X) Change () Addition
Name: GRAY, CHRISTINE
Address: 2877 BLOOMING ALAMANDA LOOP
City-St-Zip: KISSIMMEE, FL 34747

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: CHRISTINE GRAY

MGR

04/30/2009

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