

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000060224

FILED  
Aug 17, 2009  
Secretary of State

**Entity Name:** MITCHELL HAMMOCK PROPERTIES, L.L.C.

**Current Principal Place of Business:**

300 WEST MITCHELL HAMMOCK ROAD  
SUITE 8  
OVIEDO, FL 32765

**New Principal Place of Business:**

**Current Mailing Address:**

300 WEST MITCHELL HAMMOCK ROAD  
SUITE 8  
OVIEDO, FL 32765

**New Mailing Address:**

FEI Number: 20-1521423      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:**

LUKAS, JOHN S  
300 W. MITCHELL HAMMOCK RD  
SUITE 8  
OVIEDO, FL 32765 US

**Name and Address of New Registered Agent:**

LUKAS, JONATHAN S  
300 W. MITCHELL HAMMOCK RD  
SUITE 8  
OVIEDO, FL 32765 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: JONATHAN LUKAS

08/17/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LUKAS, JONATHAN S  
Address: 300 W MITCHELL HAMMOCK RD STE 8  
City-St-Zip: OVIEDO, FL 32765

Title: MGRM ( ) Delete  
Name: LUKAS, JONATHAN S JR.  
Address: 300 W MITCHELL HAMMOCK RD STE 8  
City-St-Zip: OVIEDO, FL 32765

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: LUKAS, JONATHAN S JR.  
Address: 300 W MITCHELL HAMMOCK RD STE 8  
City-St-Zip: OVIEDO, FL 32765

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: JONATHAN LUKAS

PR

08/17/2009

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