

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jul 18, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000061863**

1. Entity Name  
**PROFESSIONAL PROPERTIES GROUP LLC**



Principal Place of Business  
**4500 W. GERALDINE DR  
CITRUS SPRINGS, FL 34433**

Mailing Address  
**4500 W. GERALDINE DR  
CITRUS SPRINGS, FL 34433**



07162008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**52-2372119**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**HARTER, ROBERT N  
4500 W GERALDINE DR  
CITRUS SPRINGS, FL 34433**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75  
Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARTER, ROBERT N 4500 W GERALDINE DR CITRUS SPRINGS, FL 34433
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARTER, JANE E 4500 W GERALDINE DR CITRUS SPRINGS, FL 34433
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U00000955514  
07/18/08-80001-006 138.75

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**

*Robert N. Harter*

7-16-2008 352-465-0054

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #