

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000062687

FILED
Mar 09, 2009
Secretary of State

Entity Name: PARTNER PROPERTIES, LLC

Current Principal Place of Business:

8653 18TH WAY N.
ST. PETERSBURG, FL 33702

New Principal Place of Business:

15520 CARRILLON ESTATES BLVD.
TAMPA, FL 33625

Current Mailing Address:

P.O. BOX 22242
ST. PETERSBURG, FL 33742

New Mailing Address:

FEI Number: 68-0591617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRUMBELOW, CAMERON W ESQUIRE
750 94TH AVE. NORTH
202
SAINT PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

BRUMBELOW, CAMERON W ESQUIRE
8601 4TH STREET NORTH
104
SAINT PETERSBURG, FL 33702 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: CAMERON BRUMBELOW

03/09/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BRUMBELOW, CAMERON W
Address: 8653 18TH WAY N.
City-St-Zip: ST. PETERSBURG, FL 33702

Title: MGRM () Delete
Name: BAUMANN, WILLIAM
Address: 15520 CARRILLON ESTATES BLVD.
City-St-Zip: TAMPA, FL 33625

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BRUMBELOW, CAMERON W
Address: 8601 4TH STREET NORTH #104
City-St-Zip: ST. PETERSBURG, FL 33702

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: CAMERON BRUMBELOW

MGRM

03/09/2009

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