

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000067395

FILED  
Apr 15, 2009  
Secretary of State

Entity Name: OPHIR PROPERTIES, LLC

**Current Principal Place of Business:**

1063 HAINES ST  
JACKSONVILLE, FL 32206 US

**New Principal Place of Business:**

**Current Mailing Address:**

1063 HAINES ST  
JACKSONVILLE, FL 32206 US

**New Mailing Address:**

FEI Number: 20-1618365

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WESTERFIELD, DEBORAH  
1063 HAINES ST  
JACKSONVILLE, FL 32206 US

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

WESTERFIELD, DEBORAH  
1063 HAINES ST  
JACKSONVILLE, FL 32206 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: DEBORAH WESTERFELD

04/15/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WESTERFIELD, DEBORAH  
Address: 1063 HAINES ST  
City-St-Zip: JACKSONVILLE, FL 32206

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WESTERFIELD, DEBORAH  
Address: 1063 HAINES ST  
City-St-Zip: JACKSONVILLE, FL 32206

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: DEBORAH WESTERFELD

MGRM

04/15/2009

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