

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071946

FILED
Apr 22, 2009
Secretary of State

Entity Name: FAMILY UNITED PROPERTY, LLC

Current Principal Place of Business:

4625 NW GASTONIA STREET
PORT SAINT LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

4625 NW GASTONIA STREET
PORT SAINT LUCIE, FL 34983

New Mailing Address:

FEI Number: 20-1707134

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENNETT, CHARLOTTE
4625 NW GASTONIA STREET
PORT SAINT LUCIE, FL 34983 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: JOHNSON, ATTHLIC
Address: 6816 NW GARBETT ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: VP () Delete
Name: BENNETT, JERRY
Address: 4625 NW GASTONIA ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: S () Delete
Name: ROSS, TAISHA
Address: 6816 NW GARBETT ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: T () Delete
Name: BENNETT, CHARLOTTE
Address: 4625 NW GASTONIA ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

ADDITIONS/CHANGES:

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

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

Title: S (X) Change () Addition
Name: CHRISTOPHER, TAISHA
Address: 6816 NW GARBETT ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

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: CHARLOTTE BENNETT

T

04/22/2009

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