

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083311

FILED
Mar 17, 2009
Secretary of State

Entity Name: CX2 INVESTMENT PROPERTIES, LLC

Current Principal Place of Business:

4 PINE LOOK PASS
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 731209
ORMOND BEACH, FL 321731209 US

New Mailing Address:

FEI Number: 20-1902702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAHLSTEDT, CHRISTIAN J MGRM
4 PINE LOOK PASS
ORMOND BEACH, FL 32173 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: MGRM () Delete
Name: MAHLSTEDT, CHRISTIAN J III
Address: P.O. BOX 731209
City-St-Zip: ORMOND BEACH, FL 321731209 US

Title: MGRM () Delete
Name: MAHLSTEDT, CAROL R
Address: P.O. BOX 731209
City-St-Zip: ORMOND BEACH, FL 321731209 US

ADDITIONS/CHANGES:

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

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: CHRISTIAN J. MAHLSTEDT III

MGRM

03/17/2009

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