

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000087331

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: MICCO REALTY INVESTORS, LLC

**Current Principal Place of Business:**

90 YEOMANS AVENUE  
LABELLE, FL 33935 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 490  
LABELLE, FL 33975 US

**New Mailing Address:**

FEI Number: 20-1962587

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOY, JOHN B JR.  
90 YEOMANS AVENUE  
LABELLE, FL 33440 US

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

BOY, JOHN B JR.  
90 YEOMANS AVENUE  
LABELLE, FL 33935 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:

01/21/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SMITH, THOMAS A  
Address: P.O. BOX 1003  
City-St-Zip: LABELLE, FL 33975 US

Title: MGRM ( ) Delete  
Name: KINNEY, KENNETH E JR.  
Address: 891 RIVER ROAD  
City-St-Zip: LABELLE, FL 33935 US

Title: MGRM ( ) Delete  
Name: BOY, JOHN B JR.  
Address: P.O. BOX 490  
City-St-Zip: LABELLE, FL 33975 US

Title: MGRM ( ) Delete  
Name: MILLER, DAVID N  
Address: P.O. BOX 1149  
City-St-Zip: LABELLE, FL 33975 US

**ADDITIONS/CHANGES:**

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

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

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: DAVID N. MILLER

MGRM

01/21/2009

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