

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000023324

Entity Name: MCCRACKEN PROPERTIES LLC

FILED  
Apr 17, 2009  
Secretary of State

## Current Principal Place of Business:

1842 EVERGREEN DR  
EDGEWATER, FL 32141

## New Principal Place of Business:

210 PARKTOWNE BLVD  
SUITE 1  
EDGEWATER, FL 32132

## Current Mailing Address:

1842 EVERGREEN DR  
EDGEWATER, FL 32141

## New Mailing Address:

210 PARKTOWNE BLVD  
SUITE 1  
EDGEWATER, FL 32132

FEI Number: 36-4570619

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCCRACKEN, MAURICE  
160 GODFREY RD  
EDGEWATER, FL 32141 US

## Name and Address of New Registered Agent:

MCCRACKEN, MAURICE  
160 GODFREY ROAD  
EDGEWATER, FL 32141 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:

04/17/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: PMGR ( ) Delete  
Name: MCCRACKEN, MAURICE JR.  
Address: 160 GODFREY RD  
City-St-Zip: EDGEWATER, FL 32141

Title: VPM ( ) Delete  
Name: MCCRACKEN, PATRICIA  
Address: 160 GODFREY RD  
City-St-Zip: EDGEWATER, FL 32141

## 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: MAURICE MCCRACKEN

PMGR

04/17/2009

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