

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000031661

FILED
Feb 12, 2009
Secretary of State

Entity Name: MOUNT VERNON PLAZA EN CORTEZ, L.L.C.

Current Principal Place of Business:

3639 CORTEZ RD WEST
SUITE 200
BRADENTON, FL 34210

New Principal Place of Business:

3639 CORTEZ ROAD WEST
SUITE 200
BRADENTON, FL 34210

Current Mailing Address:

4501 MANATEE AVENUE WEST
#219
BRADENTON, FL 34209

New Mailing Address:

FEI Number: 25-1918759 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WITT, JUDY A
C/O WAGNER REALTY
3639 CORTEZ RD WEST SUITE 200
BRADENTON, FL 34210 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: WEENER, CALVIN SR
Address: 6928 120TH AVE
City-St-Zip: HOLLAND, MI 49424

Title: MGRM () Delete
Name: WEENER, EMILY
Address: 6928 120TH AVE
City-St-Zip: HOLLAND, MI 49424

Title: MGR () Delete
Name: WITT, JUDY
Address: 4501 MANATEE AVENUE WEST #219
City-St-Zip: BRADENTON, FL 34209

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:

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: JUDY A WITT

MGR

02/12/2009

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