

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000048329

**FILED**  
**May 12, 2010**  
**Secretary of State**

**Entity Name:** MAFFEO FAMILY PROPERTIES, LLC

**Current Principal Place of Business:**

3400 N. COURTENAY PARKWAY  
MERRITT ISLAND, FL 32953

**New Principal Place of Business:**

**Current Mailing Address:**

3400 N. COURTENAY PARKWAY  
MERRITT ISLAND, FL 32953

**New Mailing Address:**

FEI Number: 20-2885429      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

MAFFEO, FREDERICK D  
C/O MAFFEO FAMILY PROPERTIES  
1785 VIA CAPRI  
MERRITT ISLAND, FL 32952 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MR.  
Name: MAFFEO, FREDERICK D  
Address: 1785 VIA CAPRI  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: MRS.  
Name: MAFFEO, DEBRA M  
Address: 1785 VIA CAPRI  
City-St-Zip: MERRITT ISLAND, FL 32952

I hereby 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: FREDERICK MAFFEO

PRES

05/12/2010

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