2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 09, 2009
Secretary of State

DOCUMENT# L05000053735

Entity Name: P & C SOUTHWEST FLORIDA PROPERTIES, LLC

Current Principal Place of Business:

1834 MAIN STREET
SARASOTA, FL 34236

New Principal Place of Business:

323 TENTH AVENUE WEST
STE. 301
PALMETTO, FL 34221

Current Mailing Address:

1834 MAIN STREET
SARASOTA, FL 34236

New Mailing Address:

323 TENTH AVENUE WEST
STE. 301
PALMETTO, FL 34221

FEI Number: 20-2917649 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHANDLER, JAMES R III
1834 MAIN STREET
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

CHANDLER, JAMES R III
323 TENTH AVENUE WEST
STE. 301
PALMETTO, FL 34221 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: _____ 01/09/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: CHANDLER, JAMES R III
Address: 1834 MAIN STREET
City-St-Zip: SARASOTA, FL 34236

Title: MGR (X) Delete
Name: PIERSON, BILLY
Address: 401 WEST 14TH STREET
City-St-Zip: LYNN HAVEN, FL 32444

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: CHANDLER, JAMES R III
Address: 323 TENTH AVENUE WEST, STE. 301
City-St-Zip: PALMETTO, FL 34221

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: JAMES R. CHANDLER, III MGR 01/09/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date