

FILED
Jun 02, 2008 8:00 am
Secretary of State

04-25-2008 90016 004 ***143.75

**2008 LIMITED LIABILITY COMPANY
 ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

DOCUMENT # L05000073738			
1. Entity Name CLL PROPERTY GROUP, LLC			
Principal Place of Business 13752 U. S. HIGHWAY 441 LADY LAKE FL 32159		Mailing Address 13752 U. S. HIGHWAY 441 LADY LAKE FL 32159	
2. Principal Place of Business - No P.O. Box # CA 17639 S.E. 88th COVINGTON Suite, Apt. #, etc.		3. Mailing Address 17639 S.E. 88th COVINGTON CIR Suite, Apt. #, etc.	
City & State THE VILLAGES FLORIDA		City & State THE VILLAGES FLORIDA	
Zip 32162	Country USA	Zip 32162	Country USA
4. FEI Number 20-4309715		Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent CHO, LILWAN 13752 U.S. HIGHWAY 441 LADY LAKE FL 32159		7. Name and Address of New Registered Agent Name ELSA PEACOCK Street Address (P.O. Box Number is Not Acceptable) 17639 S.E. 88th COVINGTON CIRCLE City & State THE VILLAGES FL Zip Code 32162	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Elsa Peacock</u> ELSA PEACOCK DATE 4-12-08 Signature typed or printed name of registered agent and 100% ownership NOTE: Registered Agent signature required when ownership			
FILE NOW!! FEE IS \$138.75 After May 1, 2008, Fee will be \$538.75 Make Check Payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM CHO, LILWAN 13752 U.S. HIGHWAY 441 LADY LAKE FL 32159 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ELSA PEACOCK 17639 S.E. 88 th COVINGTON CIRCLE THE VILLAGES, FLORIDA 32162 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM LEE, BYUNG C 1017 PARKSIDE POINTE BLVD APOPKA FL 32712 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM LEE, YONG M 6321 HOLLY GLEN RUN APOPKA FL 32703 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate, and that my 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 606, Florida Statutes.			
SIGNATURE: <u>Elsa Peacock</u> ELSA PEACOCK		DATE 4-12-08 352-751-4314	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		DATE	