## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000092115

Entity Name: ULMERTON POINTE OUTPARCELS, L.L.C.

Apr 23, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1733 WEST FLETCHER AVENUE 310 BLOUNT STREET TAMPA, FL 33612 US

#108

TALLAHASSEE, FL 32301 US

**Current Mailing Address: New Mailing Address:** 

1733 WEST FLETCHER AVENUE PO BOX 15694

TAMPA, FL 33612 TALLAHASSEE, FL 32317 US

FEI Number: 20-3485880 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ROSEN, PETER S 416 NORTH ADAMS STREET TALLAHASSEE, FL 32301

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: ADDITIONS/CHANGES:

Title: () Change () Addition () Delete

LEONI, STEVEN M Name: Name: Address: 416 NORTH ADAMS STREET Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip:

Title: () Delete Title: MGR ( ) Change (X) Addition

Name: Name: ROSEN, PETER S

Address: Address: 423 ALL SAINTS STREET #1 City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32301

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: PETER ROSEN 04/23/2009