

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000092198

FILED
Apr 25, 2009
Secretary of State

Entity Name: GREEN MEADOWS PROPERTIES, L.L.C.

Current Principal Place of Business:

3322 OLYMPIC DRIVE
UNIT 222
NAPLES, FL 34105

New Principal Place of Business:

Current Mailing Address:

3322 OLYMPIC DRIVE
UNIT 222
NAPLES, FL 34105

New Mailing Address:

FEI Number: 20-3491925

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANCANAN, JOCELYN C
3785 AIRPORT ROAD
STE B-2
NAPLES, FL 34105 US

Name and Address of New Registered Agent:

ANCANAN, JOCELYN C
3322 OLYMPIC DRIVE, UNIT 222
NAPLES, FL 34105 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:

04/25/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ANCANAN, JOCELYN
Address: 3322 OLYMPIC DRIVE, UNIT 222
City-St-Zip: NAPLES, FL 34105 US

Title: MGR () Delete
Name: JANE LEE, CYNTHIA
Address: 2546 NORTHBROOK PLAZA DRIVE #6
City-St-Zip: NAPLES, FL 34119

Title: S () Delete
Name: ANCANAN, NOEL L
Address: 3322 OLYMPIC DRIVE, UNIT 222
City-St-Zip: NAPLES, FL 34105

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: JOCELYN ANCANAN

MS.

04/25/2009

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