2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000097981

Entity Name: PINENEEDLE MHP, LLC

364 GOLF VIEW ROAD, UNIT 307

NORTH PALM BEACH, FL 33408

Address:

City-St-Zip:

FILED Apr 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5353 TRIBUNE DRIVE ORLANDO, FL 32812 **Current Mailing Address: New Mailing Address:** 4751 DISTRIBUTION CT, STE 12 ORLANDO, FL 32822 FEI Number: 20-3590780 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: HANKINS, RON C 5353 TRIBUNE DRIVE ORLANDO, FL 32812 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete HANKINS, RONALD C Name: Name: 5353 TRIBUNE DRIVE Address: Address: City-St-Zip: ORLANDO, FL 32812 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition WEBB, RANDALL D Name: Name: Address: 22448 SEA BASS DRIVE Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HARLOW, EDWARD T Name: Name: Address: 11051 NW 33RD STREET Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: BALL, DAMON N Name: 5301 GRAND BANKS BLVD Address: Address: City-St-Zip: GREENACRES, FL 33463 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition COOK, CHARLES F Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: RON HANKINS MGRM 04/28/2009