

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098421

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: EUNICE PROPERTIES, LLC

**Current Principal Place of Business:**

5350 ALTA BAHIA COURT  
SAN DIEGO, CA 92109

**New Principal Place of Business:**

**Current Mailing Address:**

5350 ALTA BAHIA COURT  
SAN DIEGO, CA 92109

**New Mailing Address:**

FEI Number: 20-3575133

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DEAN MEAD SERVICES, LLC  
800 MAGNOLIA AVENUE STE 1500  
ORLANDO, FL 32803 US

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

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:**

Title: MGRM ( ) Delete  
Name: LEAVY, JOHN J  
Address: 5350 ALTA BAHIA COURT  
City-St-Zip: SAN DIEGO, CA 92109

Title: MGRM ( ) Delete  
Name: LEAVY, DENNIS M  
Address: 1829 LONGPOND DR  
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM ( ) Delete  
Name: MUSULIN, MICHAEL S  
Address: 15770 N GREENWAY HAYDEN LP #104  
City-St-Zip: SCOTTSDALE, AZ 85260

Title: MGRM ( ) Delete  
Name: LEAVY, KEVIN E  
Address: 11305 WILLS CREEK ROAD  
City-St-Zip: SAN DIEGO, CA 92131

**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:

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: JOHN J. LEAVY

MGRM

01/07/2009

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