## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000102447

Entity Name: OC PROPERTIES, LLC

FILED Jan 28, 2009 Secretary of State

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

36474 A EMERALD COAST PARKWAY 36474C EMERALD COAST PARKWAY **SUITE 1201** 

SUITE 3301

DESTIN, FL 32541

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

P. O. BOX 1469 DESTIN, FL 32540

DESTIN, FL 32541

FEI Number: 20-4112639 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:

BARKER, GENE G 45 N. BEÁL PARKWAY

FT. WALTON BEACH, FL 32548 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:

City-St-Zip:

Electronic Signature of Registered Agent Date

Title:

Name:

Address:

City-St-Zip:

## MANAGING MEMBERS/MANAGERS:

() Delete CBG PROPERTIES, INC. Name:

Address: 36474A EMERALD COAST PARKWAY, STE 1201

City-St-Zip: DESTIN, FL 32541

Title: MEM () Delete Name: OC DESTIN GROUP, INC,

Address: 36474A EMERALD COAST PARKWAY, STE 1201

City-St-Zip: DESTIN, FL 32541

() Delete

Name: Address:

Title:

Title: (X) Change ( ) Addition

DESTIN, FL 32541

JAY, JAMES S

Name: OC DESTIN GROUP, INC,

Address: 36474C EMERALD COAST PARKWAY, STE 3301

(X) Change ( ) Addition

36474C EMERALD COAST PARKWAY, STE 3301

City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition

Name: CBG PROPERTIES, INC.

36474C EMERALD COAST PARKWAY, SUITE 3301 Address:

City-St-Zip: DESTIN, FL 32541

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: JAMES S. JAY 01/28/2009