2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000107073

FILED
May 05, 2008
Secretary of State

Entity Name: LIBERTY SQUARE OFFICE PROPERTIES, LC

Current Principal Place of Business:

725 EAST OAK STREET
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

PO BOX 692049
ORLANDO, FL 32836

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

WRIGHT, FULFORD, MOORHEAD & BROWN, P.A.
145 NORTH MAGNOLIA AVENUE
ORLANDO, FL 32801 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: STEELE, WILLIAM A M.D.
Address: 8738 LAKE TIBET COURT
City-St-Zip: ORLANDO, FL 32836

Title: MGRM ( ) Delete
Name: GOFF, MAYNARD III,PHD
Address: 8319 DIAMOND COVE CIRCLE
City-St-Zip: ORLANDO, FL 32836

ADDITIONS/CHANGES:

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: WILLIAM A. STEELE, MD MGRM 05/05/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date