2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000107461

Entity Name: MARION PROPERTIES & INVESTMENTS, LLC

FILED May 11, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
1834 S.W. 1ST AVENUE OCALA, FL 34474		1834 S.W. 1ST AVEI STE 101 OCALA, FL 34471	NUE
Current Mailing Address:		New Mailing Address:	
1834 S.W. 1ST AVENUE OCALA, FL 34474		1834 S.W. 1ST AVENUE STE 101 OCALA, FL 34471	
FEI Number In accordan	: FEI Number Applied For() FEI lice with s. 607.193(2)(b), F.S., the limited liability company o	Number Not Applicable (X) lid not receive the prior notic	Certificate of Status Desired () ce.
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:
KOHLI, NA 1834 S.W. OCALA, F	1ST AVENUE		
The above in the State	e named entity submits this statement for the purpos e of Florida.	e of changing its register	ed office or registered agent, or both,
SIGNATUI	RF [.]		
	Electronic Signature of Registered Agent		 Date
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete KOHLI, NAGESH 1834 S.W. 1ST AVENUE OCALA, FL 34474	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () Delete BAPATLA, AMRUTH S 6041 S.W. 73RD STREET ROAD OCALA, FL 34476	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () Delete ROHATGI, RAKESH 321 S.E. 29TH PLACE, SUITE 102 OCALA, FL 34471	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () Delete HUQ, NASIN 3200 S.W. 34TH AVE. OCALA, FL 33474	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () Delete PATEL, SANJAY 310 S.E. 29TH PLACE, SUITE 100 OCALA, FL 34471	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM () Delete PURUSHOTTAM, MITRA 1834 S.W. 1ST AVE. OCALA, FL 34474	Title: Name: Address: City-St-Zip:	() Change () Addition

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: NAGESH KOHLI MD 05/11/2009