

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000111235

Entity Name: DUKE GROVE, LLC

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

7051 CYPRESS TERRACE SUITE 110
FORT MYERS, FL 33907

New Principal Place of Business:

12995 S CLEVELAND AVE
SUITE 219
FORT MYERS, FL 33907

Current Mailing Address:

POST OFFICE BOX 60151
FORT MYERS, FL 33907

New Mailing Address:

POST OFFICE BOX 60151
FORT MYERS, FL 33906

FEI Number: 20-3807701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOODYARD, THOMAS E
7051 CYPRESS TERRACE
#110
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

WOODYARD, THOMAS E
12995 S CLEVELAND AVE
SUITE 219
FORT MYERS, FL 33907 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:

01/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WOODYARD, THOMAS E
Address: 7051 CYPRESS TERRACE, STE 110
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WOODYARD, THOMAS E
Address: 12995 S CLEVELAND AVE, SUITE 219
City-St-Zip: FORT MYERS, FL 33907

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: THOMAS E WOODYARD

MGR

01/14/2009

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