

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000114229

FILED  
Apr 14, 2009  
Secretary of State

**Entity Name:** FLORIDA SOUTHERN PROPERTIES, L.L.C.

**Current Principal Place of Business:**

2810 REMINGTON GREEN CIRCLE  
SUITE A  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

2878 REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308

**Current Mailing Address:**

2810 REMINGTON GREEN CIRCLE  
SUITE A  
TALLAHASSEE, FL 32308

**New Mailing Address:**

2878 REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

PADGETT, TIMOTHY D ESQ.  
2810 REMINGTON GREEN CIRCLE  
SUITE A  
TALLAHASSEE, FL 32308 US

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

PADGETT, TIMOTHY D ESQ.  
2878 REMINGTON GREEN CIRCLE  
TALLAHASSEE, FL 32308 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: TIMOTHY D. PADGETT

04/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PADGETT, TIMOTHY D  
Address: 2810 REMINGTON GREEN CIRCLE, SUITE A  
City-St-Zip: TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: PADGETT, TIMOTHY D  
Address: 2878 REMINGTON GREEN CIRCLE  
City-St-Zip: TALLAHASSEE, FL 32308

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: TIMOTHY D. PADGETT

MGRM

04/14/2009

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