

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000117019

Entity Name: CAROLINA ESTATES, LLC

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

5334 SE HORSESHOE POINT RD.
STUART, FL 34997

New Principal Place of Business:

5314 SE HORSESHOE POINT RD.
STUART, FL 34997

Current Mailing Address:

5334 SE HORSESHOE POINT RD.
STUART, FL 34997

New Mailing Address:

5314 SE HORSESHOE POINT RD.
STUART, FL 34997

FEI Number: 20-4361563

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERRARO, NINA L
1100 S. FEDERAL HIGHWAY
STUART, FL 34994 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: SKEL, BETTY S
Address: 5334 SE HORSESHOE POINT RD.
City-St-Zip: STUART, FL 34997

Title: MGRM () Delete
Name: WEST, HERBERT A
Address: 5334 SE HORSESHOE POINT RD.
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SKEL, BETTY S
Address: 5314 SE HORSESHOE POINT RD.
City-St-Zip: STUART, FL 34997

Title: MGRM (X) Change () Addition
Name: WEST, HERBERT A
Address: 5314 SE HORSESHOE POINT RD.
City-St-Zip: STUART, FL 34997

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: BETTY S. SKEL

MGR

04/15/2009

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