2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2009
Secretary of State

DOCUMENT# L05000119608

Entity Name: AMG 5 INVESTMENT PROPERTIES, LLC

Current Principal Place of Business:

19081 SE REACH ISLAND LN
JUPITER, FL 33458 US

New Principal Place of Business:

Current Mailing Address:

19081 SE REACH ISLAND LN
JUPITER, FL 33458 US

New Mailing Address:

FEI Number: 20-4026573 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WILLBUR, DEAN E ESQ.
1100 NORTH OLIVE AVE.
WEST PALM BEACH, FL 33401 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:	GARCIA, FRANCISCO F TRUSTEE	
Address:	19081 SE REACH ISLAND LN	
City-St-Zip:	JUPITER, FL 33458 US	
Title:	MGRM	( ) Delete
Name:	FRANK, GARCIA F FRANK G	
Address:	19081 SE REACH ISLAND LN	
City-St-Zip:	JUPITER, FL 33458 US	
Title:	MGRM	( ) Delete
Name:	GARCIA, FRANK F FRANK G	
Address:	19081 SE REACH ISLAND LN	
City-St-Zip:	JUPITER, FL 33458 US	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: FRANK GARCIA MMGR 01/14/2009

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