

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000122626

FILED  
Jan 06, 2011  
Secretary of State

**Entity Name:** CARLSON & MEISSNER PROPERTIES, L.L.C.

**Current Principal Place of Business:**

250 N. BELCHER ROAD  
SUITE 102  
CLEARWATER, FL 33765

**New Principal Place of Business:**

**Current Mailing Address:**

250 N. BELCHER ROAD  
SUITE 102  
CLEARWATER, FL 33765

**New Mailing Address:**

**FEI Number:** 56-2546803      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CARLSON, EDWARD D  
250 N. BELCHER ROAD  
SUITE 102  
CLEARWATER, FL 33765 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  
Name: MEISSNER, PAUL A JR.  
Address: 250 N. BELCHER ROAD SUITE 102  
City-St-Zip: CLEARWATER, FL 33765

Title: MGRM  
Name: CARLSON, EDWARD D  
Address: 250 N. BELCHER ROAD SUITE 102  
City-St-Zip: CLEARWATER, FL 33765

Title: MGRM  
Name: CARLSON, CASEY K  
Address: 250 N. BELCHER RD. N. SUITE 102  
City-St-Zip: CLEARWATER, FL 33765

Title: MGRM  
Name: HAYSLETT, JAMES K  
Address: 250 N. BELCHER RD. SUITE 102  
City-St-Zip: CLEARWATER, FL 33765

Title: MGRM  
Name: HART, JOHN L  
Address: 250 N. BELCHER RD. SUITE 102  
City-St-Zip: CLEARWATER, FL 33765

I hereby 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: PAUL MEISSNER      MGRM      01/06/2011

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