

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000002445

Entity Name: EMORY HEIGHTS, LLC

FILED
Jan 15, 2009
Secretary of State

Current Principal Place of Business:

5601 2ND STREET WEST
LEHIGH ACRES, FL 33971 US

New Principal Place of Business:

Current Mailing Address:

5601 2ND STREET WEST
LEHIGH ACRES, FL 33971 US

New Mailing Address:

FEI Number: 20-4065840

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAILEY, GLENN V
5601 2ND STREET WEST
LEHIGH ACRES, FL 33971 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: BAILEY, GLENN V
Address: 5601 2ND STREET WEST
City-St-Zip: LEHIGH ACRES, FL 33971 US

Title: M (X) Delete
Name: MANSSON, LARS
Address: 1504 SW 56TH TERRACE
City-St-Zip: CAPE CORAL, FL 33914 US

Title: M (X) Delete
Name: MANSSON, ANDERS
Address: 523 SW 53RD TERRACE
City-St-Zip: CAPE CORAL, FL 33914 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: GLENN V BAILEY

MGRM

01/15/2009

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