2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000010497

Entity Name: NORTHERN PROPERTIES, LLC

FILED Jan 27, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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27499 RIVERVIEW CENTER BLVD. 14538 INDIGO LAKES CR. NAPLES, FL 34119 US

BONITA SPRINGS, FL 34134 US

Current Mailing Address: New Mailing Address:

27499 RIVERVIEW CENTER BLVD.
134
BONITA SPRINGS, FL 34134 US
14538 INDIGO LAKES CR.
NAPLES, FL 34119 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

INGLESE, PAUL A
27499 RIVERVIEW CENTER BLVD.
134

INGLESE, PAUL A
14538 INDIGO LAKES CR.
NAPLES, FL 34119 US

BONITA SPRINGS, FL 34134 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: PAUL INGLESE 01/27/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 INGLESE, PAUL A
 Name:

 Address:
 14538 INDIGO LAKES CR.
 Address:

 City-St-Zip:
 NAPLES, FL 34119 US
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 CASTRO, JOSE A
 Name:

 Address:
 3680 16TH AVE NE
 Address:

 City-St-Zip:
 NAPLES, FL 34120 US
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 GUADALUPE, RUBEN D
 Name:

 Address:
 3201 ORANGE GROVE TRAIL
 Address:

 City-St-Zip:
 NAPLES, FL 34120 US
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 PUENTE, JAHAZIEL
 Name:

 Address:
 2919 ORANGE GROVE TRAIL
 Address:

 City-St-Zip:
 NAPLES, FL 34120 US
 City-St-Zip:

 Name:
 PUENTE, GUILLERMO
 Name:

 Address:
 310 16TH AVE
 Address:

 City-St-Zip:
 NAPLES, FL 34120 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PAUL INGLESE MGR 01/27/2007