

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000026684

Entity Name: P3P PROPERTIES,LLC.

FILED  
Mar 03, 2008  
Secretary of State

## Current Principal Place of Business:

7611 SOUTH O.B.T  
# 168  
ORLANDO, FL 32809

## New Principal Place of Business:

7301 BROCKBANK DRIVE  
ORLANDO, FL 32809

## Current Mailing Address:

7611 SOUTH O.B.T  
# 168  
ORLANDO, FL 32809

## New Mailing Address:

FEI Number: 02-0771655

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATNAIK, PRASHANT  
7301, BROCKBANK DRIVE  
ORLANDO, FL 32809 US

## Name and Address of New Registered Agent:

PATNAIK, PROSANNA  
7301 BROCKBANK DRIVE  
ORLANDO, FL 32809 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: PROSANNA PATNAIK

03/03/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: PRASHANT, PATNAIK  
Address: 7301 BROCKBANK DRIVE  
City-St-Zip: ORLANDO, FL 32809

Title: MGR (X) Delete  
Name: PROSANNA, PATNAIK  
Address: 7301 BROCKBANK DRIVE  
City-St-Zip: ORLANDO, FL 32809

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: PROSANNA, PATNAIK  
Address: 7301 BROCKBANK DRIVE  
City-St-Zip: ORLANDO, FL 32809

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: PROSANNA PATNAIK

MGRM

03/03/2008

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