

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000085025

FILED
Jun 22, 2009
Secretary of State

Entity Name: PANHANDLE INVESTMENT GROUP, L.L.C.

Current Principal Place of Business:

37 TUPELO AVENUE
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

37 TUPELO AVENUE
FORT WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 20-5465505 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BROWN, THOMAS M
37 TUPELO AVENUE
FORT WALTON BEACH, FL 32548 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRP () Delete
Name: BOYETTE, WAYNE T
Address: PO BOX 2095
City-St-Zip: FORT WALTON BEACH, FL 32549

Title: MGRP () Delete
Name: RICE, EDWARD E
Address: 701-A EDGE ST
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: MGRP () Delete
Name: VOSBURGH, LESLIE
Address: 803 SOUTH DR.
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: MGRP () Delete
Name: BROWN, THOMAS M
Address: 37 TUPELO AVENUE
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: MGRP () Delete
Name: HOWARD, GARY
Address: PO BOX 245
City-St-Zip: SHALIMAR, FL 32579

Title: MGRP () Delete
Name: HENDERSON, JAMES H II
Address: 575 L'OMBRE CIRCLE
City-St-Zip: FORT WALTON BEACH, FL 32547

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Title: () Change () Addition
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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: THOMAS M. BROWN

MGRP

06/22/2009

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