

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089376

FILED
Jan 29, 2009
Secretary of State

Entity Name: RED SPECKLED BRAHMA PROPERTIES, LLC

Current Principal Place of Business:

1496 EAST SUNSET LANE
AVON PARK, FL 33825

New Principal Place of Business:

1496 EAST CLARADGE AVENUE
AVON PARK, FL 33825

Current Mailing Address:

1496 EAST SUNSET LANE
AVON PARK, FL 33825

New Mailing Address:

1496 EAST CLARADGE AVENUE
AVON PARK, FL 33825

FEI Number: 51-0611613

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SALVO, PAM
1496 EAST SUNSET LANE
AVON PARK, FL 33825 US

Name and Address of New Registered Agent:

SALVO, JOSEPH
1496 EAST CLARADGE AVENUE
AVON PARK, FL 33825 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: JOSEPH SALVO

01/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SALVO, JOSEPH
Address: 1496 EAST SUNSET LANE
City-St-Zip: AVON PARK, FL 33825

Title: MGR (X) Delete
Name: SALVO, PAM
Address: 1496 EAST SUNSET LANE
City-St-Zip: AVON PARK, FL 33825

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SALVO, JOSEPH
Address: 1496 EAST CLARADGE AVENUE
City-St-Zip: AVON PARK, FL 33825

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: JOSEPH SALVO

MGRM

01/29/2009

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