

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000100103

Entity Name: BROWN PROPERTIES LLC

FILED  
Apr 28, 2009  
Secretary of State

**Current Principal Place of Business:**

54426 WILBUR JONES ROAD  
CALLAHAN, FL 32011

**New Principal Place of Business:**

**Current Mailing Address:**

54426 WILBUR JONES ROAD  
CALLAHAN, FL 32011

**New Mailing Address:**

FEI Number: 20-5478240      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BROWN, WALTER L  
54426 WILBUR JONES ROAD  
CALLAHAN, FL 32011 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: MGR ( ) Delete  
Name: BROWN, WALTER L  
Address: 54426 WILBUR JONES ROAD  
City-St-Zip: CALLAHAN, FL 32011

Title: MGR ( ) Delete  
Name: WINGO, MISTY  
Address: 45128 BROWN STREET  
City-St-Zip: CALLAHAN, FL 32011

Title: MGR ( ) Delete  
Name: FOURES, KATRINA  
Address: 45125 ROBINWOOD CIR  
City-St-Zip: CALLAHAN, FL 32011

Title: MGR ( ) Delete  
Name: BROWN, WALTER O  
Address: 54426 WILBUR JONES ROAD  
City-St-Zip: CALLAHAN, FL 32011

**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:

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: WALTER BROWN

MGR

04/28/2009

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