2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE: 1

SIGNATURE AND TYPED OR PRINTED NAME OF

Jan 14, 2008 8:00 am Secretary of State 01-14-2008 90041 034 ***138.75 DOCUMENT # L06000102467 CENTURION PROPERTIES LLC Principal Place of Business Mailing Address 60001141 12940 METRO PARKWAY 1142 OLD FT. GREEN RD FT. MYERS, FL 33912-1319 WAUCHULA, FL 33873-7710 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01052008 Chg-LLC CR2E083 (12/06) City & State City & State Applied For 4. FEI Number 14-1982303 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DEER, JOHN E 1142 OLD FT, GREEN RD Street Address (P.O. Box Number is Not Acceptable) WAUCHULA, FL 33873-7710 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9, 10. MGRM TITLE TITLE ☐ Change Addition ☐ Delete PAGE, RUSSELL S NAME NAME 1612 SAVONA PARKWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 339045041 CITY-ST-ZIP **MGRM** TITLE Delete HILLE ☐ Change Addition PAGE, LEIGH A NAME NAME STREET ADDRESS 1612 SAVONA PARKWAY STREET ADDRESS City-ST-ZIP CAPE CORAL, FL 339045041 CITY-ST-ZIP MGRM TITLE ☐ Delete TITLE □ Change ☐ Addition NAME PAGE, CHARLES R NAME STREET ADDRESS 1612 SAVONA PARKWAY STREET ADDRESS CITY - ST-ZIP CAPE CORAL, FL 339045041 CITY-ST-ZIP DDE ☐ Change ☐ Addition TITLE MGRM Delete PAGE, VICTORIA L NAME NAME STREET ADDRESS STREET ADDRESS 1612 SAVONA PARKWAY CITY-S1-ZIP CITY - ST-ZIP CAPE CORAL, FL 339045041 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - S1 - ZIP TITLE Addition ☐ Defete ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

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