

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000102954

Entity Name: WALNUT MOUNTAIN, LLC

FILED
Feb 05, 2009
Secretary of State

Current Principal Place of Business:

16119 FLAGG POND LANE
NORTH FORT MYERS, FL 33917 US

New Principal Place of Business:

11923 ADONCIA WAY
#2801
FORT MYERS, FL 33912 US

Current Mailing Address:

16119 FLAGG POND LANE
NORTH FORT MYERS, FL 33917 US

New Mailing Address:

11923 ADONCIA WAY
#2801
FORT MYERS, FL 33912 US

FEI Number: 20-5759751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COONER, JEFFREY C
16119 FLAGG POND LANE
NORTH FORT MYERS, FL 33917 US

Name and Address of New Registered Agent:

COONER, JEFFREY C
11923 ADONCIA WAY # 2801
FORT MYERS, FL 33912 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:

02/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COONER, JEFFREY C
Address: 16119 FLAGG POND LANE
City-St-Zip: NORTH FORT MYERS, FL 33917 US

Title: MGRM () Delete
Name: COONER, SHERRI D
Address: 16119 FLAGG POND LANE
City-St-Zip: NORTH FORT MYERS, FL 33917 US

Title: MGRM () Delete
Name: RAFFERTY, EVERETT D
Address: 614 ASTARIAS CIRCLE
City-St-Zip: FORT MYERS, FL 33919 US

Title: MGRM () Delete
Name: RAFFERTY, CHARLOTTE
Address: 614 ASTARIAS CIRCLE
City-St-Zip: FORT MYERS, FL 33919 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COONER, JEFFREY C
Address: 11923 ADONCIA WAY # 2801
City-St-Zip: FORT MYERS, FL 33912 US

Title: MGRM (X) Change () Addition
Name: COONER, SHERRI D
Address: 11923 ADONCIA WAY # 2801
City-St-Zip: FORT MYERS, FL 33912 US

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: SHERRI D COONER

MGRM

02/05/2009

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