

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000108216

Entity Name: MICAP PROPERTIES, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

1029 VALLEWAY DRIVE
APOPKA, FL 32712 US

New Principal Place of Business:

Current Mailing Address:

1029 VALLEWAY DRIVE
APOPKA, FL 32712 US

New Mailing Address:

P.O. BOX 3601
ORLANDO, FL 32802 US

FEI Number: 20-5851620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALAFOX, MICHAEL C
5310 MICCO DRIVE
ORLANDO, FL 32839 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: MGRM () Delete
Name: PALAFOX, MICHAEL C
Address: 1029 VALLEWAY DRIVE
City-St-Zip: APOPKA, FL 32712 US

Title: MGRM () Delete
Name: PALAFOX, CHARLOTTE C
Address: 1029 VALLEWAY DRIVE
City-St-Zip: APOPKA, FL 32712 US

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: PALAFOX, CHARLOTTE A
Address: 1029 VALLEWAY DRIVE
City-St-Zip: APOPKA, FL 32712 US

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: MICHAEL C. PALAFOX

MGRM

04/29/2009

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