

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000110118

FILED
Mar 20, 2009
Secretary of State

Entity Name: WILDLIFE MANAGEMENT PROPERTIES LLC

Current Principal Place of Business:

13253 EMERALD ACRES AVE.
DOVER, FL 33527 US

New Principal Place of Business:

Current Mailing Address:

13253 EMERALD ACRES AVE.
DOVER, FL 33527 US

New Mailing Address:

FEI Number: 38-3746164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARWELL, JAMES A JR.
13253 EMERALD ACRES AVE.
DOVER, FL 33527 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: HARWELL, JAMES A JR.
Address: 13253 EMERALD ACRES AVE.
City-St-Zip: DOVER, FL 33527 US

Title: MGRM () Delete
Name: HARWELL, VALERIE A
Address: 13253 EMERALD ACRES AVE.
City-St-Zip: DOVER, FL 33527 US

Title: MGR () Delete
Name: SMITH, KEITH E
Address: 1303 TIMBERRIDGE LOOP SOUTH.
City-St-Zip: LAKELAND, FL 33809 US

Title: MGRM () Delete
Name: SMITH, BETTY J
Address: 1303 TIMBERRIDGE LOOP SOUTH
City-St-Zip: LAKELAND, FL 33809 US

Title: MGR () Delete
Name: OSBORNE, JOHNIE W
Address: 2041 WILLIAMS RD.
City-St-Zip: PLANT CITY, FL 33565 US

Title: MGRM () Delete
Name: OSBORNE, LEIGH A
Address: 2041 WILLIAMS RD.
City-St-Zip: PLANT CITY, FL 33565 US

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
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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: JAMES A. HARWELL, JR.

MGR

03/20/2009

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