2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000112061

Entity Name: PONCE PROPERTIES, LLC

FILED Jan 06, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6827 BLUFFS BOULEVARD 6827 BLUFFS BOULEVARD TEMPLE TERRACE, FL 33618 TEMPLE TERRACE, FL 33617

Current Mailing Address: New Mailing Address:

6827 BLUFFS BOULEVARD 6827 BLUFFS BOULEVARD TEMPLE TERRACE, FL 33618 TEMPLE TERRACE, FL 33617

FEI Number: 20-5932860 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RENO, HERMAN R 6827 BLUFFS BLVD TEMPLE TERRACE, FL 33617 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.

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SIGNATURE: _____

ADDITIONS/CHANGES:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 PONCE, MONICA
 Name:

 Address:
 3410 W. NEW ORLEANS
 Address:

 City-St-Zip:
 TAMPA, FL 33614
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 RENO, NORMA C
 Name:

 Address:
 6827 BLUFFS BLVD
 Address:

 City-St-Zip:
 TEMPLE TERRACE, FL 33617
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 RENO, HERMAN R
 Name:

 Address:
 6827 BLUFFS BLVD
 Address:

 City-St-Zip:
 TEMPLE TERRACE, FL 33617
 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: NORMA RENO MGRM 01/06/2009