

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000001492

FILED
Feb 07, 2008
Secretary of State

Entity Name: TRUE TROPICS PROPERTIES LLC

Current Principal Place of Business:

16460 N.W. 15TH STREET
PEMBROKE PINES, FL 33028 US

New Principal Place of Business:

Current Mailing Address:

16460 N.W. 15TH STREET
PEMBROKE PINES, FL 33028 US

New Mailing Address:

PO BOX 824026
PEMBROKE PINES, FL 33082 US

FEI Number: 20-8283889

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 US

Name and Address of New Registered Agent:

CHASTAIN, DAVID J MGRM
16460 NW 15TH STREET
PEMBROKE PINES, FL 33028 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: DAVID CHASTAIN

02/07/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CHASTAIN, DAVID
Address: 16460 N.W. 15TH STREET
City-St-Zip: PEMBROKE PINES, FL 33028 US

ADDITIONS/CHANGES:

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: DAVID CHASTAIN

MGRM

02/07/2008

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