

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000022707

Entity Name: ACRES PROP LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

5624 2ND ST W
BRADENTON, FL 34207

New Principal Place of Business:

205 57TH AVE W
BRADENTON, FL 34207

Current Mailing Address:

PO BOX 405
ONECO, FL 34264

New Mailing Address:

FEI Number: 74-3206750

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTIN, CYNTHIA J
5624 2ND ST W
BRADENTON, FL 34207 US

Name and Address of New Registered Agent:

MARTIN, CYNTHIA J
205 57TH AVE W
BRADENTON, FL 34207 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: CYNTHIA J MARTIN

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MARTIN, CLIFTON
Address: 205 57TH AVE W
City-St-Zip: BRADENTON, FL 34207 US

Title: MGR (X) Delete
Name: MARTIN, CYNTHIA J
Address: 205 57TH AVE W
City-St-Zip: BRADENTON, FL 34207 US

Title: MGRM (X) Delete
Name: MARTIN, CLIFTON J JR
Address: PO BOX 405
City-St-Zip: ONECO, FL 34264 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MARTIN, CLIFTON J JR
Address: PO BOX 405
City-St-Zip: ONECO, FL 34264 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: CLIFTON J MARTIN JR

MGR

04/30/2009

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