## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000039141

Entity Name: CASCADES AT HALIFAX PLANTATION, LLC

FILED Apr 17, 2009 Secretary of State

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

131 BUSINESS CENTER DRIVE 131 BUSINESS CENTER DRIVE SUITE 11-B

SUITE B11 ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 1626

ORMOND BEACH, FL 32175

FEI Number: 20-8823811 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:

TUMBLESON, J. DOYLE 150-A SOUTH PALMETTO AVENUE DAYTONA BEACH, FL 32114

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: ADDITIONS/CHANGES:

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

BLEDSOE, J. RONNIE Name: Name: BLEDSOE, J. RONNIE

Address: 131 BUSINESS CENTER DRIVE, SUITE 11-B Address: 131 BUSINESS CENTER DRIVE, SUITE B11

ORMOND BEACH', FL 32174 City-St-Zip: City-St-Zip: ORMOND BEACH, FL 32174

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

MYNCHENBERG, PARKER K Name: Name: Address: 1729 RIDGEWOOD AVENUE Address: City-St-Zip: HOLLY HILL, FL 32117 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 RONNIE BLEDSOE **MGRM** 04/17/2009