

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000039399

FILED
Apr 22, 2009
Secretary of State

Entity Name: PIER POINT COMMERCIAL, LLC

Current Principal Place of Business:

580 ATLANTIC BLVD.
NEPTUNE BEACH, FL 32266

New Principal Place of Business:

Current Mailing Address:

580 ATLANTIC BLVD.
NEPTUNE BEACH, FL 32266

New Mailing Address:

FEI Number: 20-8836080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PROCTOR, STEPHEN P
580 ATLANTIC BLVD.
NEPTUNE BEACH, FL 32266 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: MGRM () Delete
Name: PROCTOR, JACK F
Address: 4495 GOLDCREST LANE
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM () Delete
Name: PROCTOR, STEPHEN P
Address: 2309 PINE ISLAND COURT
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM () Delete
Name: PROCTOR, BETTY L
Address: 4495 GOLDCREST LANE
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM () Delete
Name: PROCTOR, JOSEPH F
Address: 1344 PINWOOD RD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: MGRM () Delete
Name: PROCTOR, ELIZABETH W
Address: 1012 BUDDY CROUT LANE
City-St-Zip: NEPTUNE BEACH, FL 32266

Title: MGRM () Delete
Name: PROCTOR, DANIEL C
Address: 580 ATLANTIC BLVD
City-St-Zip: NEPTUNE BEACH, FL 32266

ADDITIONS/CHANGES:

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
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Title: () Change () Addition
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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: ELIZABETH PROCTOR

MGRM

04/22/2009

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