

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000047141

FILED
Apr 14, 2009
Secretary of State

Entity Name: ADVENTURE PROPERTIES, LLC

Current Principal Place of Business:

368 MELBOURN
HAINES CITY, FL 33844 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 7897
LAKELAND, FL 33807

New Mailing Address:

FEI Number: 20-8987416

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHUPE, ROB
368 MELBOURN
HAINES CITY, FL 33844 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: SHUPE, ROB
Address: 368 MELBOURN
City-St-Zip: HAINES CITY, FL 33844 US

Title: MGRM () Delete
Name: CRAIN, LYNN
Address: 6760 ENGLELAKE DRIVE
City-St-Zip: LAKELAND, FL 33813 US

ADDITIONS/CHANGES:

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: ROB SHUPE

MGRM

04/14/2009

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