

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000049454

FILED
Apr 01, 2009
Secretary of State

Entity Name: FLAG METS I, LLC

Current Principal Place of Business:

5555 GLENRIDGE CONNECTOR
SUITE 1100
ATLANTA, GA 30342 US

New Principal Place of Business:

Current Mailing Address:

20 SOUTH BROAD STREET
BROOKSVILLE, FL 34601 US

New Mailing Address:

5555 GLENRIDGE CONNECTOR
SUITE 1100
ATLANTA, GA 30342 US

FEI Number: 26-0142261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE HOGAN LAW FIRM, LLC
20 SOUTH BROAD STREET
BROOKSVILLE, FL 34601 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: IV PROPERTIES, INC.
Address: 3384 ASHFORD PARK CT
City-St-Zip: ATLANTA, GA 30319 US

Title: MGRM () Delete
Name: WILLIAMS LAND DEVELOPMENT, LLC
Address: 3101 BRANDY STATION
City-St-Zip: ATLANTA, GA 30339 US

Title: MGRM () Delete
Name: UNDERWOOD, TYRUS
Address: 5555 GLENRIDGE CONNECTOR SUITE 1100
City-St-Zip: ATLANTA, GA 30342 US

Title: MGRM () Delete
Name: BRANNEN, MITCHELL V
Address: 5555 GLENRIDGE CONNECTOR SUITE 1100
City-St-Zip: ATLANTA, GA 30342 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ERNIE WILLIAMS

MR.

04/01/2009

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