

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000049946

FILED  
Jan 13, 2009  
Secretary of State

Entity Name: CLARA MORRIS PROPERTIES, LLC

**Current Principal Place of Business:**

621 LAKE DORA ROAD  
MOUNT DORA, FL 32757

**New Principal Place of Business:**

621 LAKE DORA ROAD  
MOUNT DORA, FL 32757 US

**Current Mailing Address:**

POST OFFICE BOX 1045  
MOUNT DORA, FL 32756

**New Mailing Address:**

POST OFFICE BOX 1045  
MOUNT DORA, FL 32756 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MATHESON, MICHAEL M  
621 LAKE DORA ROAD  
MOUNT DORA, FL 32757 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: MATHESON, MICHAEL M  
Address: 621 LAKE DORA ROAD  
City-St-Zip: MOUNT DORA, FL 32757

Title: MGRM ( ) Delete  
Name: MATHESON, ANN B  
Address: 621 LAKE DORA ROAD  
City-St-Zip: MOUNT DORA, FL 32757

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MATHESON, MICHAEL M  
Address: 621 LAKE DORA ROAD  
City-St-Zip: MOUNT DORA, FL 32757 US

Title: MGRM (X) Change ( ) Addition  
Name: MATHESON, ANN B  
Address: 621 LAKE DORA ROAD  
City-St-Zip: MOUNT DORA, FL 32757 US

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: MICHAEL M. MATHESON

MGRM

01/13/2009

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