

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000050136

Entity Name: MIB PROPERTIES, LLC

FILED
Mar 04, 2009
Secretary of State

Current Principal Place of Business:

301 S. TUBB STREET
SUITE G
OAKLAND, FL 34760

New Principal Place of Business:

Current Mailing Address:

301 S. TUBB STREET
SUITE G
OAKLAND, FL 34760

New Mailing Address:

P. O. BOX 1010
OAKLAND, FL 34760

FEI Number: 26-0152693

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GREEN, BRAXTON JR.
301 S. TUBB STREET
SUITE G
OAKLAND, FL 34760 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: GREEN, BRAXTON JR.
Address: 301 S. TUBB STREET, SUITE G
City-St-Zip: OAKLAND, FL 34760

Title: MGRM () Delete
Name: GREEN, BRAXTON III
Address: 301 S. TUBB STREET, SUITE G
City-St-Zip: OAKLAND, FL 34760

Title: MGRM () Delete
Name: GREEN, BRETT
Address: 301 S. TUBB STREET, SUITE G
City-St-Zip: OAKLAND, FL 34760

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:

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: BRAXTON GREEN, JR.

MGRM

03/04/2009

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