

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000055325

FILED
Apr 20, 2009
Secretary of State

Entity Name: LINDHAVEN PROPERTIES, LLC

Current Principal Place of Business:

581 S. COUNTRY CLUB DRIVE
ATLANTIS, FL 33462

New Principal Place of Business:

4050 PLUMBAGO PLACE
LAKE WORTH, FL 33462

Current Mailing Address:

581 S. COUNTRY CLUB DRIVE
ATLANTIS, FL 33462

New Mailing Address:

4050 PLUMBAGO PLACE
LAKE WORTH, FL 33462

FEI Number: 61-1530802

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIND, STACEY
581 S. COUNTRY CLUB DRIVE
ATLANTIS, FL 33462 US

Name and Address of New Registered Agent:

LIND, STACEY
4050 PLUMBAGO PLACE
LAKE WORTH, FL 33462 US

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:

04/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LIND, STACEY
Address: 581 S. COUNTRY CLUB DRIVE
City-St-Zip: ATLANTIS, FL 33462

Title: MGRM () Delete
Name: LIND, DANIEL
Address: 581 S. COUNTRY CLUB DRIVE
City-St-Zip: ATLANTIS, FL 33462

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LIND, STACEY
Address: 4050 PLUMBAGO PLACE
City-St-Zip: LAKE WORTH, FL 33462

Title: MGRM (X) Change () Addition
Name: LIND, DANIEL
Address: 4050 PLUMBAGO PLACE
City-St-Zip: LAKE WORTH, FL 33462

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: STACEY LIND

MGRM

04/20/2009

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