

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000058392

FILED  
Mar 28, 2009  
Secretary of State

Entity Name: CUSTOM PROPERTIES, LLC

**Current Principal Place of Business:**

13455 AQUILINE RD.  
JACKSONVILLE, FL 32224

**New Principal Place of Business:**

**Current Mailing Address:**

13455 AQUILINE RD.  
JACKSONVILLE, FL 32224

**New Mailing Address:**

FEI Number: 32-0244328

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SIGLEY, JEAN R  
13455 AQUILINE RD.  
JACKSONVILLE, FL 32224 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: MGR ( ) Delete  
Name: SIGLEY, CLEBERN W  
Address: 13455 AQUILINE RD.  
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM (X) Delete  
Name: SIGLEY, JEAN R  
Address: 13455 AQUILINE RD.  
City-St-Zip: JACKSONVILLE, FL 32224

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SIGLEY, CLEBERN W  
Address: 13455 AQUILINE ROAD  
City-St-Zip: JACKSONVILLE, FL 32224

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: CLEBERN W SIGLEY

MGR

03/28/2009

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