## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000068433

Entity Name: FROELICH PROPERTY INTERESTS, LLC

FILED Apr 20, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6109 MASTERS BLVD. ORLANDO, FL 32819

Current Mailing Address: New Mailing Address:

6109 MASTERS BLVD. P.O. BOX 858

ORLANDO, FL 32819 WINDERMERE, FL 34786 US

FEI Number: 26-0483245 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GROOVER, CLARAMARGARET H ESQ. 390 NORTH ORANGE AVE., SUITE 2300 ORLANDO, FL 32801 US

MANAGING MEMBERS/MANAGERS:

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

## Electronic Signature of Registered Agent

## ADDITIONS/CHANGES:

MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 FORELICH, DAVID S
 Name:
 FROELICH, DAVID S

 Address:
 6109 MASTERS BLVD.
 Address:
 6109 MASTERS BLVD.

 City-St-Zip:
 ORLANDO, FL 32819
 City-St-Zip:
 ORLANDO, FL 32819

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 FORELICH, JOYCE T
 Name:
 FROELICH, JOYCE T

 Address:
 6109 MASTERS BLVD.
 Address:
 6109 MASTERS BLVD.

 City-St-Zip:
 ORLANDO, FL 32819
 City-St-Zip:
 ORLANDO, FL 32819

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 KLIER, PATTY F
 Name:
 KLIER, PATRICIA F

 Address:
 6109 MASTERS BLVD.
 Address:
 6109 MASTERS BLVD.

 City-St-Zip:
 ORLANDO, FL 32819
 City-St-Zip:
 ORLANDO, FL 32819

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 KLIER, ALEX
 Name:
 KLIER, ALEXANDER

 Address:
 6109 MASTERS BLVD.
 Address:
 6109 MASTERS BLVD.

 City-St-Zip:
 ORLANDO, FL 32819
 City-St-Zip:
 ORLANDO, FL 32819

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: JOYCE T. FROELICH CHAI 04/20/2008