

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000099793

**FILED**  
**Apr 13, 2010**  
**Secretary of State**

**Entity Name:** S&A CFI PROPERTIES, LLC

**Current Principal Place of Business:**

6078 WATERWOOD TRAIL  
BARTOW, FL 33830 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1119  
HIGHLAND CITY, FL 33846 US

**New Mailing Address:**

**FEI Number:** 26-1166804

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PUTNAM, ABEL A  
500 SOUTH FLORIDA AVE.  
SUITE 300  
LAKELAND, FL 33801 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  
**Name:** SACKETT, TRACY L  
**Address:** 6078 WATERWOOD TRAIL  
**City-St-Zip:** BARTOW, FL 33830 US

**Title:** MGRM  
**Name:** AGNER, KATHY L  
**Address:** 5410 STRICKLAND AVE.  
**City-St-Zip:** LAKELAND, FL 33812

**Title:** MGRM  
**Name:** SACKETT, RICHARD W  
**Address:** 6078 WATERWOOD TRAIL  
**City-St-Zip:** BARTOW, FL 33830 US

**Title:** MGRM  
**Name:** AGNER, WILLIAM M JR.  
**Address:** 5410 STRICKLAND AVE  
**City-St-Zip:** LAKELAND, FL 33812 US

I hereby 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:** TRACY SACKETT

MGRM

04/13/2010

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