

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105434

Entity Name: PROP MANAGEMENT, LLC

FILED  
Apr 28, 2008  
Secretary of State

**Current Principal Place of Business:**

1550 6TH ST. SE  
WINTER HAVEN, FL 33880

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 6039 CYPRESS GARDENS BLVD  
302  
WINTER HAVEN, FL 33884

**New Mailing Address:**

1550 6TH ST. SE  
WINTER HAVEN, FL 33880

FEI Number: 26-1203101

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMITH, KAREN  
1550 6TH ST. SE  
WINTER HAVEN, FL 33880 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: SMITH, KAREN L  
Address: 421 WHITMAN ROAD  
City-St-Zip: WINTER HAVEN, FL 33884

Title: MGR ( ) Delete  
Name: SMITH, RICK M  
Address: 421 WHITMAN ROAD  
City-St-Zip: WINTER HAVEN, FL 33884

**ADDITIONS/CHANGES:**

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: RICK M SMITH

MGR

04/28/2008

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