

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000109359

FILED
Feb 04, 2009
Secretary of State

Entity Name: LMP AT HAMMOCKS CAPE HAZE, LLC

Current Principal Place of Business:

11600 DR. MARTIN LUTHER KING, JR. ST. N.
ST. PETERSBURG, FL 33716

New Principal Place of Business:

11600 NINTH STREET N
ST. PETERSBURG, FL 33716

Current Mailing Address:

11600 DR. MARTIN LUTHER KING, JR. ST. N.
ST. PETERSBURG, FL 33716

New Mailing Address:

11600 NINTH STREET N
ST. PETERSBURG, FL 33716

FEI Number: 26-2712973

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

REDDEN, DAVID H
11600 DR. MARTIN LUTHER KING, JR. ST. N.
ST. PETERSBURG, FL 33716 US

Name and Address of New Registered Agent:

REDDEN, DAVID H
111600 NINTH STREET N
ST. PETERSBURG, FL 33716 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:

02/04/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PRES () Delete
Name: PERMUY, MITCH
Address: 11207 BLUE HERON BLVD N
City-St-Zip: ST. PETERSBURG, FL 33716

Title: CFO () Delete
Name: PERMUY, DANA F
Address: 11207 BLUE HERON BLVD N
City-St-Zip: ST. PETERSBURG, FL 33716

Title: V (X) Delete
Name: ZDON, MEREDITH
Address: 11207 BLUE HERON BLVD N
City-St-Zip: ST. PETERSBURG, FL 33716

Title: V (X) Delete
Name: REDDEN, DAVID H
Address: 11207 BLUE HERON BLVD N
City-St-Zip: ST. PETERBSBURG, FL 33716

Title: V (X) Delete
Name: KRONICK, DIANA
Address: 11207 BLUE HERON BLVD N
City-St-Zip: ST. PETERSBURG, FL 33716

ADDITIONS/CHANGES:

Title: MGM (X) Change () Addition
Name: PERMUY, MITCH
Address: 11600 NINTH STREET N
City-St-Zip: ST. PETERSBURG, FL 33716

Title: MGM (X) Change () Addition
Name: PERMUY, DANA F
Address: 11600 NINTH STREET N
City-St-Zip: ST. PETERSBURG, FL 33716

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DAVID H. REDDEN

VP

02/04/2009

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