

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000116288

Entity Name: PAR THREE APARTMENTS, LLC

FILED  
Feb 05, 2009  
Secretary of State

**Current Principal Place of Business:**

1480 GULF BLVD. SUITE 110  
CLEARWATER, FL 33767

**New Principal Place of Business:**

**Current Mailing Address:**  
1480 GULF BLVD. SUITE 110  
CLEARWATER, FL 33767

**New Mailing Address:**

FEI Number: 26-1457595      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SCHILLING, NANCY G  
1480 GULF BLVD. SUITE 110  
CLEARWATER, FL 33767 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 ( ) Delete  
Name: SCHILLING, NANCY G  
Address: 1480 GULF BLVD. SUITE 110  
City-St-Zip: CLEARWATER, FL 33767

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: SCHILLING, JEFF P  
Address: 1480 GULF BLVD. SUITE 110  
City-St-Zip: CLEARWATER, FL 33767

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

( ) Change ( ) Addition

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: NANCY GRIMME SCHILLING

MGRM

02/05/2009

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