

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000035299

Entity Name: FORD APARTMENTS, LLC

FILED  
Jan 05, 2009  
Secretary of State

**Current Principal Place of Business:**

117 WEST ST. JOHNS TERRACE  
EAST PALATKA, FL 32131

**New Principal Place of Business:**

**Current Mailing Address:**

117 WEST ST. JOHNS TERRACE  
EAST PALATKA, FL 32131

**New Mailing Address:**

1205 MOSELEY AVE.  
PALATKA, FL 32177

FEI Number: 26-3212975

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CASON, KEMBERLY R.J.  
1205 MOSELEY AVENUE S.  
PALATKA, FL 321775617 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: CASON, KEMBERLY R.J.  
Address: 1205 MOSELEY AVENUE S  
City-St-Zip: PALATKA, FL 321775617

**ADDITIONS/CHANGES:**

Title: MMGR (X) Change ( ) Addition  
Name: CASON, KEMBERLY R.J.  
Address: 1205 MOSELEY AVENUE S  
City-St-Zip: PALATKA, FL 321775617

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: KEMBERLY R.J. CASON

MGRM

01/05/2009

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