

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000077995

FILED
Apr 09, 2009
Secretary of State

Entity Name: SANTILLES 2, LLC

Current Principal Place of Business:

140 S.W. CHAMBER COURT, #200
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

140 S.W. CHAMBER COURT, #200
PORT ST. LUCIE, FL 34986 US

Current Mailing Address:

140 S.W. CHAMBER COURT, #200
PORT ST. LUCIE, FL 34986

New Mailing Address:

140 S.W. CHAMBER COURT, #200
PORT ST. LUCIE, FL 34986 US

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: SANDERS, JONATHAN
Address: 140 S.W. CHAMBER COURT, #200
City-St-Zip: PORT ST. LUCIE, FL 34986 US

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: JONATHAN SANDERS MGRM 04/09/2009

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