

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000084740

FILED  
Mar 25, 2009  
Secretary of State

**Entity Name:** PINE HILLS INVESTMENT GROUP LLC

**Current Principal Place of Business:**

1236 N PINE HILLS ROAD  
ORLANDO, FL 32808 US

**New Principal Place of Business:**

**Current Mailing Address:**

1236 N PINE HILLS ROAD  
ORLANDO, FL 32808 US

**New Mailing Address:**

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

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

SHERLYN INSURANCE AGENCY INC  
1236 N PINE HILLS ROAD  
ORLANDO, FL 32808 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: SHERLYN INSURANCE AG, ENCY INC  
Address: 1236 N PINE HILLS ROAD  
City-St-Zip: ORLANDO, FL 32808 US

Title: MGR ( ) Delete  
Name: MITCHELL, DON  
Address: 1236 N PINE HILLS ROAD  
City-St-Zip: ORLANDO, FL 32808

**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: DON MITCHELL

MGR

03/25/2009

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