

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000103559

FILED  
Aug 13, 2009  
Secretary of State

Entity Name: SQUARE PROPERTIES, LLC

## Current Principal Place of Business:

1628 SHADY LEAF DR.  
VALRICO, FL 33596

## New Principal Place of Business:

## Current Mailing Address:

23638 LYONS AVE #223  
NEWHALL, CA 91321

## New Mailing Address:

PSC 303 BOX 31  
APO, AP 96204

FEI Number: 26-3669568      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

REGISTERED AGENTS OF AMERICA, INC.  
199 EAST FLAGLER STREET #510  
MIAMI, FL 33131      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: JOHNSON, LORENZO  
Address: 1628 SHADY LEAF DR.  
City-St-Zip: VALRICO, FL 33596

Title: MGR      ( ) Delete  
Name: JOHNSON, MICHELLE RENEE  
Address: 1628 SHADY LEAF DR.  
City-St-Zip: VALRICO, FL 33596

Title: MGR      ( ) Delete  
Name: HUGHES, CORNELIUS V JR  
Address: 2002 TIDEWATER CT.  
City-St-Zip: TAMPA, FL 33619

## ADDITIONS/CHANGES:

Title: MGR      (X) Change ( ) Addition  
Name: JOHNSON, LORENZO  
Address: PSC 303 BOX 31  
City-St-Zip: APO, AP 96204

Title: MGR      (X) Change ( ) Addition  
Name: JOHNSON, MICHELLE RENEE  
Address: PSC 303 BOX 31  
City-St-Zip: APO, AP 96204

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: LORENZO JOHNSON

MGR

08/13/2009

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