

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000016597

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** ARROWHEAD PROPERTIES, LLC

**Current Principal Place of Business:**

5050 LAKE PIERCE DR  
LAKE WALES, 33898 FL

**New Principal Place of Business:**

5050 LAKE PIERCE DR  
LAKE WALES, FL 33898 US

**Current Mailing Address:**

5050 LAKE PIERCE DR  
LAKE WALES, FL 33898 US

**New Mailing Address:**

5050 LAKE PIERCE DR.  
LAKE WALES, FL 33898 US

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FUTCH, SWINTON D  
5050 LAKE PIERCE DR  
LAKE WALES, FL 33898 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  
Name: FUTCH, SWINTON D  
Address: 5050 LAKE PIERCE DR  
City-St-Zip: LAKE WALES, FL 33898 US

Title: MGRM  
Name: FUTCH, GRACE P  
Address: 5050 LAKE PIERCE DR  
City-St-Zip: LAKEWALES, FL 33898

I hereby 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:** SWINTON D. FUTCH

MGRM

04/29/2010

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