

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000027419

**FILED**  
**Feb 14, 2010**  
**Secretary of State**

**Entity Name:** DELKON PROPERTIES, L.L.C.

**Current Principal Place of Business:**

2735 SANTA BARBARA BLVD., STE 201  
CAPE CORAL, FL 33914

**New Principal Place of Business:**

**Current Mailing Address:**

2735 SANTA BARBARA BLVD., STE 201  
CAPE CORAL, FL 33914

**New Mailing Address:**

**FEI Number:** 26-4499763

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WRIGHT, CHRISTINE F ESQ  
2735 SANTA BARBARA BLVD., STE 201  
CAPE CORAL, FL 33914 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  
**Name:** DELANEY, CATHERINE  
**Address:** 1450 SE 17TH TERRACE  
**City-St-Zip:** CAPE CORAL, FL 33904

**Title:** MGR  
**Name:** KONLEY, RHONDA  
**Address:** 1712 E. CAPE CORAL PKWY  
**City-St-Zip:** CAPE CORAL, FL 33904

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:** RHONDA R KONLEY

MGR

02/14/2010

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