

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000092117

**FILED**  
**Feb 15, 2010**  
**Secretary of State**

**Entity Name:** ANGEL PROPERTY MANAGEMENT, LLC

**Current Principal Place of Business:**

6635 W COMMERCIAL BLVD  
SUITE 211  
TAMARAC, FL 33319 US

**New Principal Place of Business:**

6635 WEST COMMERCIAL BLVD.  
SUITE 211  
TAMARAC, FL 33319 US

**Current Mailing Address:**

PO BOX 27018  
TAMARAC, FL 33320 US

**New Mailing Address:**

6635 WEST COMMERCIAL BLVD.  
SUITE 211  
TAMARAC, FL 33319 US

**FEI Number:** 27-1013606

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHISHOLM, KAREN  
6635 W COMMERCIAL BLVD  
SUITE 211  
TAMARAC, FL 33319 US

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

CHISHOLM, KAREN  
6635 WEST COMMERCIAL BLVD.  
SUITE 211  
TAMARAC, FL 33319 US

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: \_\_\_\_\_

02/15/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CHISHOLM, LENWORTH  
Address: PO BOX 27018  
City-St-Zip: TAMARAC, FL 33320 US

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: LENWORTH CHISHOLM

MGRM

02/15/2010

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