

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000118018

**FILED**  
**Mar 23, 2010**  
**Secretary of State**

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

**Current Principal Place of Business:**

5571 HALIFAX AVENUE  
FORT MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

5571 HALIFAX AVENUE  
FORT MYERS, FL 33912

**New Mailing Address:**

**FEI Number:** 27-1491996

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NOLAND, JOHN A  
1715 MONROE STREET  
FORT MYERS, FL 33901 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: MCNEW, QUINTON B TRUSTEE  
Address: 5571 HALIFAX AVENUE  
City-St-Zip: FORT MYERS, FL 33912

Title: MGR  
Name: MCNEW, BEVERLY H TRUSTEE  
Address: 5571 HALIFAX AVENUE  
City-St-Zip: FORT MYERS, FL 33912

Title: MGR  
Name: NOLAND, JOHN A TRUSTEE  
Address: 5571 HALIFAX AVENUE  
City-St-Zip: FORT MYERS, FL 33912

Title: MGR  
Name: INGE, RONALD E TRUSTEE  
Address: 5571 HALIFAX AVENUE  
City-St-Zip: FORT MYERS, FL 33912

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: RONALD E INGE

MGR

03/23/2010

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