

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000005555

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** OBJECTIVE PROPERTIES, LLC

**Current Principal Place of Business:**

1201 FIFTH AVENUE NORTH, SUITE 210  
ST. PETERSBURG, FL 33705

**New Principal Place of Business:**

431 S.W. BLVD NORTH  
ST. PETERSBURG, FL 33703

**Current Mailing Address:**

1201 FIFTH AVENUE NORTH, SUITE 210  
ST. PETERSBURG, FL 33705

**New Mailing Address:**

431 S.W. BLVD NORTH  
ST. PETERSBURG, FL 33703

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

MCKALIP, DAVID M  
1201 FIFTH AVENUE NORTH, SUITE 210  
ST. PETERSBURG, FL 33705 US

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

MCKALIP, DAVID M  
431 S.W. BLVD. NORTH  
ST. PETERSBURG, FL 33703 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: DAVID M. MCKALIP

02/17/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: DR  
Name: MCKALIP, DAVID M  
Address: 431 S.W. BLVD. NORTH  
City-St-Zip: ST. PETERSBURG, FL 33703

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: DAVID M. MCKALIP

DR.

02/17/2011

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