

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000000249

FILED
Mar 16, 2009
Secretary of State

Entity Name: MATHEWS HAINES CITY INVESTMENTS, L.C.

Current Principal Place of Business:

3843 W. LAKE HAMILTON DR
WINTER HAVEN, FL 338818223

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 438
HAINES CITY, FL 338450438

New Mailing Address:

3843 W. LAKE HAMILTON DR
WINTER HAVEN, FL 338818223

FEI Number: 59-3500711

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATHEWS, EDWARD D TRUSTEE
GRANTOR RETAINED ANNUITY TRUST
30 CLUB CT
HAINES CITY, FL 33844 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 () Delete
Name: MATHEWS, EDWARD D TRUSTEE
Address: 30 CLUB CT
City-St-Zip: HAINES CITY, FL 33844

Title: MGRM () Delete
Name: MATHEWS, CHARLES A TRUSTEE
Address: 30 CLUB CT
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: EDWARD D. MATHEWS

MGRM

03/16/2009

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