

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000003499

FILED
Jan 08, 2009
Secretary of State

Entity Name: MOULTRIE OAKS MOBILE HOME PARK, L.L.C.

Current Principal Place of Business:

245 WILDWOOD DRIVE
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

245 WILDWOOD DRIVE
ATTN OFFICE
ST. AUGUSTINE, FL 32086

Current Mailing Address:

245 WILDWOOD DRIVE
ST. AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 59-3567777 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WATSON, TODD
7785 BAYMEADOWS WAY, SUITE 107
JACKSONVILLE, FL 32256 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 () Delete
Name: STASCHIAK, JOHN D
Address: 245 WILDWOOD DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: MGR () Delete
Name: STASCHIAK, ANNE D
Address: 245 WILDWOOD DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32086

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: JOHN D. STASCHIAK

MGR

01/08/2009

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