

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000001530

FILED  
Jan 12, 2009  
Secretary of State

Entity Name: FIELDSTONE PROPERTIES, L.C.

**Current Principal Place of Business:**

1712 N. BAHAMA AVENUE  
MARCO ISLAND, FL 34145

**New Principal Place of Business:**

**Current Mailing Address:**

1712 N. BAHAMA AVENUE  
MARCO ISLAND, FL 34145

**New Mailing Address:**

1712 N BAHAMA AVE  
MARCO ISLAND, FL 34145

FEI Number: 59-3573313

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROCHE, CHRISTOPHER A ESQ.  
229 NORTH COLLIER BOULEVARD  
MARCO ISLAND, FL 34145 US

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

ROCHE, CHRISTOPHER A ESQ.  
1712 N BAHAMA AVE  
MARCO ISLAND, FL 34145 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:

01/12/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: JOEL, ARNON R  
Address: 1712 N. BAHAMA AVENUE  
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGRM ( ) Delete  
Name: JOEL, NORA I  
Address: 1712 N. BAHAMA AVENUE  
City-St-Zip: MARCO ISLAND, FL 34145

**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: ARNON RONY JOEL

MGRM

01/12/2009

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