

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000001669

**FILED**  
**Feb 12, 2008**  
**Secretary of State**

**Entity Name:** SIX STAR PROPERTIES, L.L.C.

**Current Principal Place of Business:**

2911 N.E. PINE ISLAND ROAD  
CAPE CORAL, FL 33909

**New Principal Place of Business:**

3443 HANCOCK BRIDGE PKWY  
#301  
N. FORT MYERS, FL 33903

**Current Mailing Address:**

2911 N.E. PINE ISLAND ROAD  
CAPE CORAL, FL 33909

**New Mailing Address:**

3443 HANCOCK BRIDGE PKWY  
#301  
N. FORT MYERS, FL 33903

**FEI Number:** 65-0906207

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FULLENKAMP, DENNIS J  
2911 N.E. PINE ISLAND ROAD  
CAPE CORAL, FL 33909 US

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

FULLENKAMP, DENNIS J  
3443 HANCOCK BRIDGE PKWY  
#301  
N. FT. MYERS, FL 33903 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: DENNIS J FULLENKAMP

02/12/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: STRAYHORN, MICHAEL M  
Address: 5670 HARBORAGE DRIVE  
City-St-Zip: FORT MYERS, FL 33908

Title: MGRM ( ) Delete  
Name: FULLENKAMP, DENNIS J  
Address: 2911 N.E. PINE ISLAND ROAD  
City-St-Zip: CAPE CORAL, FL 33909

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: FULLENKAMP, DENNIS J  
Address: 3443 HANCOCK BRIDGE PKWY #301  
City-St-Zip: N. FORT MYERS, FL 33903

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: DENNIS J FULLENKAMP

MGRM

02/12/2008

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