

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000007407

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: REDFISH VILLAGE INVESTORS, LLC

**Current Principal Place of Business:**

100 PEABODY PLACE, SUITE 1200  
MEMPHIS, TN 38103

**New Principal Place of Business:**

**Current Mailing Address:**

100 PEABODY PLACE, SUITE 1200  
MEMPHIS, TN 38103

**New Mailing Address:**

FEI Number: 26-1589017

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

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

MCCARTHY, PATRICK K  
4475 LEGENDARY DRIVE  
DESTIN, FL 32541 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: PATRICK K MCCARTHY

04/29/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BENTON, WILLIAM B JR  
Address: 100 PEABODY PLACE, SUITE 1200  
City-St-Zip: MEMPHIS, TN 38103

Title: MGR (X) Delete  
Name: ADAMS, J. KEVIN  
Address: 100 PEABODY PLACE, SUITE 1200  
City-St-Zip: MEMPHIS, TN 38103

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ADAMS, J. KEVIN  
Address: 100 PEABODY PLACE, SUITE 1200  
City-St-Zip: MEMPHIS, TN 38103

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: J. KEVIN ADAMS

MGR

04/29/2009

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