

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P96000094560

FILED
Sep 09, 2009
Secretary of State**Entity Name:** CARLISLE PROPERTY MANAGEMENT, INC.**Current Principal Place of Business:**2950 SW 27TH AVE., #200
COCONUT GROVE, FL 33133 US**New Principal Place of Business:****Current Mailing Address:**2950 SW 27TH AVE., #200
#303
COCONUT GROVE, FL 33133 US**New Mailing Address:****FEI Number:** 65-0712618 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BOGGIO, LLOYD J.
2950 SW 27TH AVE
#200
COCONUT GROVE, FL 33133 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**OFFICERS AND DIRECTORS:****Title:** D () Delete
Name: BOGGIO, LLOYD J
Address: 2950 SW 27TH AVE, # 200
City-St-Zip: COCONUT GROVE, FL 33133**Title:** D (X) Delete
Name: GREER, MATTHEW S
Address: 2950 SW 27TH AVE #200
City-St-Zip: COCONUT GROVE, FL 33133**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** D (X) Change () Addition
Name: 1754 LLC
Address: 2950 SW 27TH AVE, # 200
City-St-Zip: COCONUT GROVE, FL 33133**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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATTHEW S GREER

D

09/09/2009

Electronic Signature of Signing Officer or Director_____
Date