

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000007032

FILED  
Apr 02, 2009  
Secretary of State

Entity Name: PINE MEADOWS, LLC

**Current Principal Place of Business:**

1666 KENNEDY CAUSEWAY  
#505  
N BAY VILLAGE, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

1666 KENNEDY CAUSEWAY  
#505  
N BAY VILLAGE, FL 33141

**New Mailing Address:**

FEI Number: 82-0588640      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

MCDONOUGH, BRIAN J  
2200 MUSEUM TOWER  
150 WEST FLAGLER STREET  
MIAMI, FL 33130 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: P ( ) Delete  
Name: SALANER, ROBERT F  
Address: 1666 KENNEDY CAUSEWAY DUITE 505  
City-St-Zip: N BAY VILLAGE, FL 33141

Title: V ( ) Delete  
Name: REID, FRANCISCO  
Address: 1666 KENNEDY CAUSEWAY DUITE 505  
City-St-Zip: N BAY VILLAGE, FL 33141

**ADDITIONS/CHANGES:**

Title: P (X) Change ( ) Addition  
Name: SALAND, ROBERT F  
Address: 1666 KENNEDY CAUSEWAY DUITE 505  
City-St-Zip: N BAY VILLAGE, FL 33141

Title: V (X) Change ( ) Addition  
Name: ROJO, FRANCISCO  
Address: 1666 KENNEDY CAUSEWAY DUITE 505  
City-St-Zip: N BAY VILLAGE, FL 33141

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: FRANCISCO ROJO

V

04/02/2009

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