

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093006

FILED
Feb 24, 2009
Secretary of State

Entity Name: WYNWOOD PROPERTIES, LLC

Current Principal Place of Business:

C/O CHARLES J. GOLDMAN
804 OCEAN DRIVE, 2ND FLOOR
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

C/O CHARLES J. GOLDMAN
804 OCEAN DRIVE, 2ND FLOOR
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 20-2050192 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEVINSON, EDWARD E ESQ.
407 LINCOLN ROAD, PH-SE
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

COURTNEY, MARLO
804 OCEAN DRIVE, 2ND FLOOR
MIAMI BEACH, FL 33139 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: MARLO COURTNEY

02/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GOLDMAN, CHARLES J
Address: 804 OCEAN DRIVE, 2ND FLOOR
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: GOLDMAN, R. ANTHONY
Address: 804 OCEAN DRIVE, 2ND FLOOR
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GOLDMAN, CHARLES J.
Address: 804 OCEAN DRIVE, 2ND FLOOR
City-St-Zip: MIAMI BEACH, FL 33139

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: CHARLES J. GOLDMAN

MGRM

02/24/2009

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