

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043971

Entity Name: SOUTHWAY PLAZA, LLC

FILED  
Jul 09, 2008  
Secretary of State

**Current Principal Place of Business:**

2495 US HIGHWAY ONE  
LAWRENCEVILLE, NJ 08648

**New Principal Place of Business:**

**Current Mailing Address:**

2495 US HIGHWAY ONE  
LAWRENCEVILLE, NJ 08648

**New Mailing Address:**

FEI Number: 20-4138014      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

ARONOVITZ, ALFRED  
11151 SW 93RD AVE  
MIAMI, FL 331763636 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PLAPINGER, SCOTT  
Address: 2495 US HIGHWAY ONE  
City-St-Zip: LAWRENCEVILLE, NJ 08648

Title: MGRM ( ) Delete  
Name: PLAPINGER, BRUCE  
Address: 560 PEOPLES PLAZA, PMB 142  
City-St-Zip: NEWARK, DE 19702

Title: MGRM ( ) Delete  
Name: PLATT, LAWRENCE  
Address: 265 FREEMAN PKWY  
City-St-Zip: PROVIDENCE, RI 02906

**ADDITIONS/CHANGES:**

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

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

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: SCOTT PLAPINGER

MGRM

07/09/2008

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