2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# L05000086624

Entity Name: PSL TOWN CENTER 2005-NORTH GP, LLC

Current Principal Place of Business:

815 COLORADO AVENUE, SUITE 101
PORT ST. LUCIE, FL 34994

New Principal Place of Business:

2100 SE OCEAN BOULEVARD
205
STUART, FL 34996

Current Mailing Address:

815 COLORADO AVENUE, SUITE 101
PORT ST. LUCIE, FL 34994

New Mailing Address:

2100 SE OCEAN BOULEVARD
205
STUART, FL 34996

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHAPIRO, MAX
815 COLORADO AVENUE, SUITE 101
PORT ST. LUCIE, FL 34994 US

Name and Address of New Registered Agent:

SHAPIRO, MAX
2100 SE OCEAN BOULEVARD
205
STUART, FL 34996 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: 04/21/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MNGR ( ) Delete
Name: SHAPIRO, SHAPIRO
Address: 815 COLORADO AVENUE
City-St-Zip: STUART, FL 34994 US

ADDITIONS/CHANGES:

Title: MNGR (X) Change ( ) Addition
Name: SHAPIRO, MAX
Address: 2100 SE OCEAN BLVD. #205
City-St-Zip: STUART, FL 34996 US

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: MAX SHAPIRO MNGR 04/21/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date