

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000019255

FILED
Feb 18, 2009
Secretary of State

Entity Name: LAS OLAS I, LLC

Current Principal Place of Business:

2920 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065

New Principal Place of Business:

1200 S. PINE ISLAND ROAD
SUITE 400
PLANTATION, FL 33324

Current Mailing Address:

2920 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065

New Mailing Address:

1200 S. PINE ISLAND ROAD
SUITE 400
PLANTATION, FL 33324

FEI Number: 20-8541277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTINELLI, LAURA A
LAURA A. MARTINELLI, P.A.
2920 UNIVERSITY DRIVE
CORAL SPRINGS, FL 33065 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: MGRM () Delete
Name: SHARE, LAWRENCE
Address: 1200 S. PINE ISLAND ROAD, SUITE 400
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHARE, LAWRENCE D
Address: 1200 S. PINE ISLAND ROAD, SUITE 400
City-St-Zip: PLANTATION, FL 33324

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: LAWRENCE D SHARE

MGRM

02/18/2009

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