

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000083998

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Entity Name:** BUC SQUARE OUTPARCEL, L.L.C.

**Current Principal Place of Business:**

1733 WEST FLETCHER AVENUE  
TAMPA, FL 33612

**New Principal Place of Business:**

8902 N DALE MABRY HWY  
SUITE 200  
TAMPA, FL 33614

**Current Mailing Address:**

1733 WEST FLETCHER AVENUE  
TAMPA, FL 33612

**New Mailing Address:**

8902 N DALE MABRY HWY  
SUITE 200  
TAMPA, FL 33614

FEI Number: 26-3285040

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEEDS, MICHAEL J  
1733 WEST FLETCHER AVENUE  
TAMPA, FL 33612 US

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

LEEDS, MICHAEL J  
8902 N DALE MABRY HWY  
TAMPA, FL 33614 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: MICHAEL J LEEDS

03/16/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: LEEDS, MICHAEL J  
Address: 8902 N DALE MABRY HWY  
City-St-Zip: TAMPA, FL 33614

Title: MGR  
Name: RICE, MITCHELL F  
Address: 8902 N DALE MABRY HWY  
City-St-Zip: TAMPA, FL 33614

I hereby 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: MITCHELL F RICE

MGR

03/16/2011

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