

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000092247

**FILED**  
**Apr 16, 2010**  
**Secretary of State**

**Entity Name:** MINTO MARINA, LLC

**Current Principal Place of Business:**

4400 W. SAMPLE ROAD, STE. 200  
ATTN: JAMES B. TRAXINGER EVP  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

4400 W. SAMPLE ROAD  
SUITE 200  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

4400 W. SAMPLE ROAD, STE. 200  
ATTN: JAMES B. TRAXINGER EVP  
COCONUT CREEK, FL 33073

**New Mailing Address:**

4400 W. SAMPLE ROAD  
SUITE 200  
COCONUT CREEK, FL 33073

FEI Number: 27-0977670

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TRAXINGER, JAMES B  
4400 W. SAMPLE ROAD, STE. 200  
COCONUT CREEK, FL 33073 US

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

TRAXINGER, JAMES B  
4400 W. SAMPLE ROAD  
SUITE 200  
COCONUT CREEK, FL 33073 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: \_\_\_\_\_

04/16/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GONZALEZ, MONICA  
Address: 4400 W. SAMPLE ROAD, SUITE 200  
City-St-Zip: COCONUT CREEK, FL 33073

Title: EVP  
Name: BELMONT, MICHAEL J  
Address: 4400 W. SAMPLE ROAD, SUITE 200  
City-St-Zip: COCONUT CREEK, FL 33073

Title: EVP  
Name: TRAXINGER, JAMES B  
Address: 4400 W. SAMPLE ROAD, SUITE 200  
City-St-Zip: COCONUT CREEK, FL 33073

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: MONICA GONZALEZ

MGR

04/16/2010

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