

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000001403

FILED  
Apr 08, 2009  
Secretary of State

Entity Name: EL-AD CAMINO REAL LLC

**Current Principal Place of Business:**

1301 INTERNATIONAL PKWY; STE 200  
SUNRISE, FL 33323

**New Principal Place of Business:**

**Current Mailing Address:**

1301 INTERNATIONAL PKWY; STE 200  
SUNRISE, FL 33323

**New Mailing Address:**

FEI Number: 20-4416724

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, STE. 4  
WESTON, FL 33331 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: MGR ( ) Delete  
Name: MANOR, JOSEPH  
Address: 1301 INTERNATIONAL PKWY; STE 200  
City-St-Zip: SUNRISE, FL 33323

Title: MGR ( ) Delete  
Name: DANIELL, ORLY  
Address: 575 MADISON AVENURE 22ND FL  
City-St-Zip: NEW YORK, NY 10022

Title: MGR ( ) Delete  
Name: BRONFMAN, ARIK  
Address: 1301 INTERNATIONAL PKWY; STE 200  
City-St-Zip: SUNRISE, FL 33323

Title: MGR ( ) Delete  
Name: ROWELL, ROBERT K  
Address: 141 PEAKED MOUNTAIN ROAD  
City-St-Zip: TOWNSHEND, VT 05353

Title: MGR ( ) Delete  
Name: WINRICH, JOSEPH K  
Address: 141 PEAKED MOUNTAIN ROAD  
City-St-Zip: TOWNSHEND, VT 05353

**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:

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: JOSEPH MANOR

P

04/08/2009

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