

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000000521

Entity Name: EMERALD GABLES I, LLC

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

232 SOUTH 4TH STREET, SUITE 200  
PHILADELPHIA, PA 19106

**New Principal Place of Business:**

FOLEY & LARDNER, 111 NORTH ORANGE AVENUE,  
SUITE 1800  
ORLANDO, FL 32801

**Current Mailing Address:**

232 SOUTH 4TH STREET, SUITE 200  
PHILADELPHIA, PA 19106

**New Mailing Address:**

FOLEY & LARDNER, 111 NORTH ORANGE AVENUE,  
SUITE 1800  
ORLANDO, FL 32801

FEI Number: 27-1065242

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

F&L CORP.  
ONE INDEPENDENT DRIVE, SUITE 1300  
JACKSONVILLE, FL 32202 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  
Name: CUSACK, MARIE TRUSTEE  
Address: ECHO GATE, TRIM  
City-St-Zip: CO. MEATH,, XX IRELAND XX

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: THOMAS K BARRY

MR

04/29/2010

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