

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000002408

FILED  
Apr 21, 2010  
Secretary of State

**Entity Name:** THE WILLIAMS ISLAND COMPANIES, LLC

**Current Principal Place of Business:**

4000 ISLAND BLVD., PH2  
AVENTURA, FL 33160

**New Principal Place of Business:**

**Current Mailing Address:**

4000 ISLAND BLVD., PH2  
AVENTURA, FL 33160

**New Mailing Address:**

FEI Number: 27-0417967

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: WILLIAMS ISLAND HOLDINGS, INC.  
Address: 4000 ISLAND BLVD., PH2  
City-St-Zip: AVENTURA, FL 33160

Title: EVP  
Name: LIEB, JAMES  
Address: 4000 ISLAND BLVD., PH2  
City-St-Zip: AVENTURA, FL 33160

Title: SVP  
Name: SILVER, JOSEPH  
Address: 4000 ISLAND BLVD., PH2  
City-St-Zip: AVENTURA, FL 33160

Title: ASEC  
Name: LILLYCROP, WILLIAM  
Address: 4000 ISLAND BLVD., PH2  
City-St-Zip: AVENTURA, FL 33160

Title: AVP  
Name: TORPEY, CARITE  
Address: 4000 ISLAND BLVD., PH2  
City-St-Zip: AVENTURA, FL 33160

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: WILLIAM J LILLYCROP

ASEC

04/21/2010

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