2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 21, 2012
Secretary of State

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Entity Name: SAWGRASS VILLAGE SHOPPING CENTER LLC

Current Principal Place of Business:

C/O CORNERSTONE REAL ESTATE ADVISERS LLC
180 GLASTONBURY BLVD., SUITE 200
GLASTONBURY, CT 06033

New Principal Place of Business:

Current Mailing Address:

C/O CORNERSTONE REAL ESTATE ADVISERS LLC
180 GLASTONBURY BLVD., SUITE 200
GLASTONBURY, CT 06033

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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: MGR
Name: MASSACHUSETTS MUTUAL LIFE INSURANCE CO
Address: 180 GLASTONBURY BLVD., SUITE 200
City-St-Zip: GLASTONBURY, CT 06033

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 Statues.

SIGNATURE: DAVID J. REILLY MGRM 02/21/2012

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