2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# L02000012568

Entity Name: 100 ACRE WOODS, LLC

Current Principal Place of Business:

15100 QUAIL ROOST DRIVE
MIAMI, FL 33187 US

New Principal Place of Business:

Current Mailing Address:

2000 ISLAND BLVD
SUITE 801
AVENTURA, FL 33160 US

New Mailing Address:

15100 QUAIL ROOST DRIVE
MIAMI, FL 33187 US

FEI Number: 81-0556729 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RICHARD, PERLMAN
2000 ISLAND BLVD
SUITE 801
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

RICHARD, PERLMAN
2600 ISLAND BLVD
SUITE 2402
AVENTURA, FL 33160 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: RICHARD PERLMAN 04/21/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: SHARKEY, KEITH
Address: 2699 S. BAYSHORE DRIVE, SUITE 400
City-St-Zip: MIAMI, FL 33133 US

Title: MGRM ( ) Delete
Name: PERLMAN, RICHARD
Address: 2000 ISLAND BLVD APT 801
City-St-Zip: NORTH MIAMI BEACH, FL 33160

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: PERLMAN, RICHARD
Address: 2600 ISLAND BLVD APT 2402
City-St-Zip: NORTH MIAMI BEACH, FL 33160

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: RICHARD PERLMAN MGRM 04/21/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date