

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000002168

Entity Name: POTOMAC REALTY CAPITAL, LLC

FILED
Aug 18, 2009
Secretary of State

Current Principal Place of Business:

C/O SAWYER PROPERTY MANAGEMENT, INC.
9658 BALTIMORE AVE., SUITE 300
BALTIMORE, MD 20740

New Principal Place of Business:

75 SECOND AVENUE
SUITE 605
NEEDHAM, MA 02494

Current Mailing Address:

C/O SAWYER PROPERTY MANAGEMENT, INC.
9658 BALTIMORE AVE., SUITE 300
BALTIMORE, MD 20740

New Mailing Address:

75 SECOND AVENUE
SUITE 605
NEEDHAM, MA 02494

FEI Number: 20-0976509 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD., SUITE 508
MIAMI, FL 33156 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: SAWYER PROPERTY MANAGEMENT, INC.
Address: 9658 BALTIMORE AVENUE, SUITE 300
City-St-Zip: BALTIMORE, MD 20740

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: POTOMAC REALTY MANAGEMENT, LLC
Address: 75 SECOND AVENUE
City-St-Zip: NEEDHAM, MA 02494

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: ANNA MARIA COLLINS

MGR

08/18/2009

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