

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000084319

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

**Entity Name:** 18453 PINES BOULEVARD, LLC

**Current Principal Place of Business:**

18453 PINES BOULEVARD  
2  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

18453 PINES BOULEVARD  
2  
PEMBROKE PINES, FL 33029

**New Mailing Address:**

**FEI Number:** 26-0133200

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONCANNON-NELSON, DYAN  
18453 PINES BOULEVARD  
2  
PEMBROKE PINES, FL 33029 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: CONCANNON-NELSON, DYAN  
Address: 18453 PINES BOULEVARD  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: MGRM  
Name: NELSON, DAVID  
Address: 18453 PINES BLVD.  
City-St-Zip: PEMBROKE PINES, FL 33029

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: DYAN CONCANNON NELSON

MGRM

04/29/2010

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