

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000029280

Entity Name: 339 GARDEN LLC

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

500 S. AUSTRALIAN AVE.  
STE. 110  
WEST PALM BEACH, FL 33401 US

**New Principal Place of Business:**

**Current Mailing Address:**

500 S. AUSTRALIAN AVE.  
STE. 110  
WEST PALM BEACH, FL 33401 US

**New Mailing Address:**

FEI Number: 72-1618077      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ZISKA, MAURA A ESQ.  
C/O KOCHMAN & ZISKA PLC  
222 LAKEVIEW AVENUE, SUITE 950  
WEST PALM BEACH, FL 33401 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: PATRICIA, BURT  
Address: 500 S. AUSTRALIAN AVE., STE. 110  
City-St-Zip: W. PALM BEACH, FL 33401 US

Title: MGRM  
Name: CALLAHAN, CAROLYN  
Address: 8 PARK DRIVE SOUTH  
City-St-Zip: RYE, NY 10580 US

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: CAROLYN CALLAHAN

MGMR

02/23/2011

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