

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000092565

FILED  
Apr 19, 2012  
Secretary of State

**Entity Name:** MCNA PROPERTIES III, LLC

**Current Principal Place of Business:**

220 ALHAMBRA CIRCLE  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

220 ALHAMBRA CIRCLE  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

FEI Number: 59-1846933

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CTC MANAGEMENT SERVICES, LLC  
220 ALHAMBRA CIRCLE, 11TH FLOOR  
CORAL GABLES, FL 33134 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: P  
Name: WILSON, MILLAR  
Address: 220 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: T  
Name: PERAZA, ALBERTO  
Address: 220 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134 FL

Title: VP  
Name: PALACIOS, MIGUEL  
Address: 220 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134 FL

Title: SO  
Name: BRACHO, MARIA  
Address: 220 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134 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: MILLAR WILSON

P

04/19/2012

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