

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000022816

**Entity Name:** EAST PINES CENTER, LLC

**Current Principal Place of Business:**

C/O LEWINGER - 5300 W. HILLSBORO BLVD  
SUITE 104  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

C/O LEWINGER - 5300 W. HILLSBORO BLVD  
SUITE 104  
COCONUT CREEK, FL 33073

**FEI Number:** 20-4833088

**Certificate of Status Desired:** No

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

BLECKER LEWINGER & COMPANY  
5300 W. HILLSBORO BLVD  
SUITE 104  
COCONUT CREEK, FL 33073 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name PEMBROKE PINES MANAGEMENT,  
INC.,  
Address PO BOX 2074  
City-State-Zip: SECAUCUS NJ 07096-2074

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JEFFREY KLANSKY

PRES

02/25/2013

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date