

**2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M0200000864

**Entity Name:** OLD BRIDGE PARK, LLC

**Current Principal Place of Business:**

5195 NW 77 AVE  
MIAMI, FL 33166

**Current Mailing Address:**

5195 NW 77 AVE  
MIAMI, FL 33166

**FEI Number:** 61-1404220

**Certificate of Status Desired:** No

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

SUNDSTROM, WILLIAM  
2548 BLAIRSTONE PINES DR  
TALLAHASSEE, FL 32301 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	CEOP	Title	ST
Name	SCHENKMAN, JOEL	Name	SCHENKMAN, RANDY
Address	5195 NW 77 AVE	Address	5195 NW 77 AVE
City-State-Zip:	MIAMI FL 33166	City-State-Zip:	MIAMI FL 33166
Title	VP	Title	VP
Name	HECHTKOPF, LARA SESQ	Name	SCHENKMAN, IAN
Address	5195 NW 77 AVE	Address	5195 NW 77 AVE
City-State-Zip:	MIAMI FL 33166	City-State-Zip:	MIAMI FL 33166

*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:** IAN SCHENKMAN

VP

01/04/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date