

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000251

FILED
Mar 19, 2009
Secretary of State

Entity Name: 37 WEST SEMINOLE STREET, LLC

Current Principal Place of Business:

37 WEST SEMINOLE
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

701 E OCEAN BLVD
STUART, FL 34994

New Mailing Address:

FEI Number: 65-1103449

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LUCIDO, THOMAS P
701 E OCEAN BLVD
STUART, FL 34994 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 () Delete
Name: LUCIDO, THOMAS
Address: 701 E OCEAN BLVD
City-St-Zip: STUART, FL 34994

Title: MGR () Delete
Name: DAVANT, DIANNE
Address: 41 SW SEMINOLE STREET
City-St-Zip: STUART, FL 34994

Title: MGR () Delete
Name: JORGE, GARCIA
Address: 781 PRK OF COMM DR 118
City-St-Zip: BOCA RATON, FL 33407

Title: MGR () Delete
Name: MARTI, HUIZENGA
Address: 13054 GILSON RD
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: THOMAS P LUCIDO

MGRM

03/19/2009

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