

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000003091

FILED
Apr 20, 2009
Secretary of State

Entity Name: CENTRECORP REALTY SERVICES, LLC

Current Principal Place of Business:

4650 DONALD ROSS ROAD
SUITE 200
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

4650 DONALD ROSS ROAD
SUITE 200
PALM BEACH GARDENS, FL 33418

New Mailing Address:

2851 JOHN STREET
SUITE 1
MARKHAM ONTARIO, ON L3R 5R7

FEI Number: 65-1081334

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., SUITE 4
WESTON, FL 33331 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: PRESTON, JOHN W.S.
Address: 4650 DONALD ROSS ROAD STE 200
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM () Delete
Name: GREEN, ROBERT S
Address: 2851 JOHN STREET SUITE ONE
City-St-Zip: MARKHAM ONT, CN L3R 5R7

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PRESTON, JOHN W.S.
Address: 4650 DONALD ROSS ROAD SUITE 200
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGR (X) Change () Addition
Name: GREEN, ROBERT S
Address: 2851 JOHN STREET SUITE 1
City-St-Zip: MARKHAM ONTARIO, ON L3R 5R7

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: ROBERT S GREEN

MGR

04/20/2009

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