2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 23, 2009
Secretary of State

DOCUMENT# L02000016567

Entity Name: DAVIE RETAIL, LLC

Current Principal Place of Business:

801 ARTHUR GODFREY ROAD
SUITE 600
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

801 ARTHUR GODFREY ROAD
SUITE 600
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 03-0510083 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEVENDORF, DANA
801 ARTHUR GODFREY ROAD, SUITE 600
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

STEWART, CYNTHIA
801 ARTHUR GODFREY ROAD, SUITE 600
MIAMI BEACH, FL 33140 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: CYNTHIA STEWART 03/23/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: BITTEL, STEPHEN
Address: 801 ARTHUR GODFREY, SUITE 600
City-St-Zip: MIAMI BEACH, FL 33140

Title: S ( ) Delete
Name: DEVENDORF, DANA
Address: 801 ARTHUR GODFREY RD; SUITE 600
City-St-Zip: MIAMI BEACH, FL 33140

ADDITIONS/CHANGES:

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

Title: S (X) Change ( ) Addition
Name: MCILROY, MINDY
Address: 801 ARTHUR GODFREY RD; SUITE 600
City-St-Zip: MIAMI BEACH, FL 33140

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: STEPHEN BITTEL MGRM 03/23/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date