

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000017257

FILED
Apr 30, 2007
Secretary of State

Entity Name: LIBERTY CITY, L.L.C.

Current Principal Place of Business:

1717 NORTH BAYSHORE DRIVE STE. 124
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

1717 NORTH BAYSHORE DRIVE STE. 124
MIAMI, FL 33132

New Mailing Address:

FEI Number: 57-1153790

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SELF, DAVID C II
324 DATURA STREET STE. 235
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

WILSON, DAVID L
1717 N. BAYSHORE DR.
SUITE 124
MIAMI, FL 33132 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: DAVID L. WILSON

04/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WILSON, DAVID L
Address: 1717 NORTH NORTH BAYSHORE DRIVE STE. 124
City-St-Zip: MIAMI, FL 33132

Title: MGRM () Delete
Name: MIAMI-DADE EMPOWERME, NT TRUST, INC
Address: 3050 BISCAYNE BOULEVARD STE. 300
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RERG DEVELOPMENT LLC,
Address: 1717 NORTH NORTH BAYSHORE DRIVE STE. 124
City-St-Zip: MIAMI, FL 33132

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: DAVID L. WILSON

MGRM

04/30/2007

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