

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019423

FILED
Apr 20, 2007
Secretary of State

Entity Name: KENDALL SQUARE MALL, LLC

Current Principal Place of Business:

12515 N. KENDALL DRIVE
SUITE 314
MIAMI, FL 33186

New Principal Place of Business:

420 S. BEACH STREET
ORMOND BEACH, FL 32174

Current Mailing Address:

420 S. BEACH STREET
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 45-0483706

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWMAN, BRUCE
12515 N. KENDALL DRIVE
SUITE 314
MIAMI, FL 32174 US

Name and Address of New Registered Agent:

NEWMAN, BRUCE
420 S. BEACH STREET
ORMOND BEACH, FL 32174 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: BRUCE NEWMAN

04/20/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: NEWMAN, BRUCE
Address: 12515 N. KENDALL DRIVE
City-St-Zip: MIAMI, FL 33186

Title: MGR () Delete
Name: CHADDERTON, TREVOR
Address: 999 PONCE DE LEON BLVD., SUITE 1045
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: NEWMAN, BRUCE
Address: 420 S. BEACH STREET
City-St-Zip: ORMOND BEACH, FL 32174

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BRUCE NEWMAN

MGR

04/20/2007

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