

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029656

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: H MARINA PROPERTIES, LLC

## Current Principal Place of Business:

450 EAST LAS OLAS BOULEVARD  
SUITE 1500  
FORT LAUDERDALE, FL 33301

## New Principal Place of Business:

## Current Mailing Address:

450 EAST LAS OLAS BOULEVARD  
SUITE 1500  
FORT LAUDERDALE, FL 33301

## New Mailing Address:

FEI Number: 16-1658620

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SERVICE USA INC  
450 E LAS OLAS BLVD  
FORT LAUDERDALE, FL 33301 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: MGRP ( ) Delete  
Name: HUIZENG, H. WAYNE JR.  
Address: 450 E LAS OLAS BLVD STE 1500  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VP ( ) Delete  
Name: HENNINGER, ROBERT J  
Address: 450 EAST LAS OLAS BOULEVARD  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: V ( ) Delete  
Name: MUXO, ALEX  
Address: 450 EAST LAS OLAS BOULEVARD  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: V ( ) Delete  
Name: VIDUEIRA, CARLOS  
Address: 450 EAST LAS OLAS BOULEVARD  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: VT ( ) Delete  
Name: BRANDEN, CRIS V  
Address: 450 EAST LAS OLAS BOULEVARD  
City-St-Zip: FORT LAUDERDALE, FL 33301

Title: S ( ) Delete  
Name: HANDLEY, RICHARD L  
Address: 450 EAST LAS OLAS BOULEVARD  
City-St-Zip: FORT LAUDERDALE, FL 33301

## ADDITIONS/CHANGES:

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

Title: V (X) Change ( ) Addition  
Name: HENNINGER, ROBERT J  
Address: 450 EAST LAS OLAS BOULEVARD  
City-St-Zip: FORT LAUDERDALE, FL 33301

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: CRIS V BRANDEN

VP

04/21/2009

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