

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006507

FILED  
May 19, 2009  
Secretary of State

Entity Name: CEDAR PLAZA, LLC

**Current Principal Place of Business:**

11500-11570 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 328THO37

**New Principal Place of Business:**

11500-11570 S. ORANGE BLOSSOM TRAIL  
ORLANDO, FL 32837

**Current Mailing Address:**

8439 EAGLS LOOP CIR  
WINDERMERE, FL 34786

**New Mailing Address:**

FEI Number: 51-0447469      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

SHIN, THOMAS S MGR  
8439 EAGLS LOOP CIR  
WINDERMERE, FL 34786      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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: SHIN, THOMAS S  
Address: 8439 EAGLES LOOP CIRCLE  
City-St-Zip: WINDERMERE, FL 34786

Title: T      ( ) Delete  
Name: SHIN, YONG S  
Address: 8439 EAGLES LOOP CIRCLE  
City-St-Zip: WINDERMERE, FL 34786

**ADDITIONS/CHANGES:**

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: THOMAS SHIN

MGR

05/19/2009

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