

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022152

Entity Name: CITY CENTER, LLC

FILED  
Jan 06, 2009  
Secretary of State

## Current Principal Place of Business:

1600 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33948

## New Principal Place of Business:

1620 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33948

## Current Mailing Address:

P.O. BOX 495910  
PORT CHARLOTTE, FL 33949

## New Mailing Address:

FEI Number: 02-0696663

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NANDIGAM, BALA  
1600 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33948 US

## Name and Address of New Registered Agent:

NANDIGAM, BALA  
1620 TAMIAMI TRAIL  
PORT CHARLOTTE, FL 33948 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: BALA NANDIGAM

01/06/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: NANDIGAM, USHA K  
Address: 1600 TAMIAMI TRAIL  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: MGRM ( ) Delete  
Name: NANDIGAM, BALA K  
Address: 1600 TAMIAMI TRAIL  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: MGRM ( ) Delete  
Name: PATEL, HIREN  
Address: 1600 TAMIAMI TRAIL  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: MGRM ( ) Delete  
Name: PATEL, DIPAL  
Address: 1600 TAMIAMI TRAIL  
City-St-Zip: PORT CHARLOTTE, FL 33948

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: NANDIGAM, USHA K  
Address: 1620 TAMIAMI TRAIL  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: MGRM (X) Change ( ) Addition  
Name: NANDIGAM, BALA K  
Address: 1620 TAMIAMI TRAIL  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: MGRM (X) Change ( ) Addition  
Name: PATEL, HIREN  
Address: 1620 TAMIAMI TRAIL  
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: MGRM (X) Change ( ) Addition  
Name: PATEL, DIPAL  
Address: 1620 TAMIAMI TRAIL  
City-St-Zip: PORT CHARLOTTE, FL 33948

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: BALA NANDIGAM

MGRM

01/06/2009

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