## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022816

Entity Name: EAST PINES CENTER, LLC

20

**FILED** Feb 12, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

**60 LEWIS AVENUE** C/O LEWINGER - 5300 W. HILLSBORO BLVD ATLANTIC BEACH, NY 11509

SUITE 104

COCONUT CREEK, FL 33073

**Current Mailing Address: New Mailing Address:** 

C/O LEWINGER - 5300 W. HILLSBORO BLVD PO BOX 2074 SECAUCUS, NJ 07096

SUITE 104

COCONUT CREEK, FL 33073

FEI Number: 20-4833088 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

FRIEDLANDER & KAMELHAIR PC BLECKER LEWINGER & COMPANY 2121 SW THIRD AVE 5300 W. HILLSBORO BLVD SUITE 501 SUITE 104

MIAMI, FL 33129 US COCONUT CREEK, FL 33073 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: RICK LEWINGER 02/12/2009

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

( ) Delete MGRM Title: () Change () Addition

PEMBROKE PINES MANAG, EMENT, INC., Name: Name: Address: PO BOX 2074 Address: City-St-Zip: SECAUCUS, NJ 070962074 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: JEFFREY KLANKSY 02/12/2009