2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024341

Entity Name: CORNERSTONE PROPERTIES OF THE TREASURE COAST, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
8560 SE SABAL ST. HOBE SOUND, FL 33455	2683 SW DOMNA RD ST LUCIE, FL 34985

Current Mailing Address:	**New Mailing Address:**
8560 SE SABAL ST. HOBE SOUND, FL 33455	

FEI Number: 76-0736005   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:**
WOOLLEY, DAVID G 8560 SE SABAL STREET HOBE SOUND, FL 33455 US	WOOLLEY, DAVID G MGR 8560 SE SABAL STREET HOBE SOUND, FL 33455 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: DVAID WOOLLEY   04/09/2009

                  Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGR ( ) Delete	Title:	MGR (X) Change ( ) Addition
Name:	WHITESIDE, DICK L	Name:	WHITESIDE, DICK L MGR
Address:	942 POMPANO DRIVE	Address:	942 POMPANO DRIVE
City-St-Zip:	JUPITER, FL 33458	City-St-Zip:	JUPITER, FL 33458

Title:	MGR ( ) Delete	Title:	MGR (X) Change ( ) Addition
Name:	WOOLLEY, DAVID	Name:	WOOLLEY, DAVID L MGR
Address:	8560 SE SABLE STREET	Address:	8560 SE SABLE STREET
City-St-Zip:	HOBE SOUND, FL 33455	City-St-Zip:	HOBE SOUND, FL 33455

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: DAVID WOOLLEY   MGR   04/09/2009

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