

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 22, 2008 08:00 AM
Secretary of State

DOCUMENT # L03000040506

1. Entity Name
IMA WATERFRONT, LLC



Principal Place of Business
1575 SAN IGNACIO, SUITE 100
CORAL GABLES, FL 33146

Mailing Address
1575 SAN IGNACIO, SUITE 100
CORAL GABLES, FL 33146



01182008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
35-2216988

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

FIELDSTONE, RONALD R
201 ALHAMBRA CIRCLE, SUITE 601
CORAL GABLES, FL 33134

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

000000835471
02/29/08-80037-009 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
SHEPPARD, BRIAN
STREET ADDRESS
1575 SAN IGNACIO AVE STE 100
CITY-ST-ZIP
CORAL GABLES, FL 33146

TITLE
NAME
BAUMGARD, DANIEL
STREET ADDRESS
1575 SAN IGNACIO AVE #100
CITY-ST-ZIP
CORAL GABLES, FL 33146

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Ralph Sheppard

2/19/08

Date

305-661-0110

Daytime Phone #