

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000047992

FILED
Jan 15, 2009
Secretary of State

Entity Name: ELM AVENUE APARTMENTS, LLC

Current Principal Place of Business:

400 SE 5TH COURT
POMPANO BEACH, FL 33060

New Principal Place of Business:

411 STARR RIDGE LOOP
LAKE WALES, FL 33898

Current Mailing Address:

PO BOX 2326
LAKE WALES, FL 33859

New Mailing Address:

FEI Number: 20-0451903

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZUKOWSKI, STEPHEN E
400 SE 5TH COURT
POMPANO BEACH, FL 33060 US

Name and Address of New Registered Agent:

ZUKOWSKI, STEPHEN E
411 STARR RIDGE LOOP
LAKE WALES, FL 33898 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: STEPHEN E. ZUKOWSKI

01/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ZUKOWSKI, STEPHEN E
Address: 400 SE 5TH COURT
City-St-Zip: POMPAN0 BEACH, FL 33060

Title: MGRM () Delete
Name: ZUKOWSKI, EDWARD A
Address: 6730 CANARY PALM CIRCLE
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ZUKOWSKI, STEPHEN E
Address: 411 STARR RIDGE LOOP
City-St-Zip: LAKE WALES, FL 33898

Title: MGRM (X) Change () Addition
Name: ZUKOWSKI, EDWARD A
Address: 411 STARR RIDGE LOOP
City-St-Zip: LAKE WALES, FL 33898

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: STEPHEN E. ZUKOWSKI

MGRM

01/15/2009

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