

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000007261

**FILED**  
**Apr 08, 2009**  
**Secretary of State**

**Entity Name:** DEAUVILLE HOTEL PROPERTY, LLC

**Current Principal Place of Business:**

6701 COLLINS AVENUE  
ST. JULIEN ROOM  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

5101 COLLINS AVENUE  
MANAGEMENT OFFICE  
MIAMI BEACH, FL 33140

**New Mailing Address:**

**FEI Number:** 20-0655862

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZARETSKY, LOUIS D.  
555 N.E. 15TH STREET  
SUITE 100  
MIAMI, FL 33132 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DEAUVILLE HOTEL MANAGEMENT, LLC  
Address: 6701 COLLINS AVENUE, ST. JULIEN ROOM  
City-St-Zip: MIAMI BEACH, FL 33141

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DEAUVILLE ASSOCIATES, LLC  
Address: 6701 COLLINS AVENUE, ST. JULIEN ROOM  
City-St-Zip: MIAMI BEACH, FL 33141

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: DEAUVILLE ASSOCIATES LLC

MGR

04/08/2009

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