

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000011726

Entity Name: GABLES STATION, LLC

**FILED**  
**Mar 22, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2665 SOUTH BAYSHORE DRIVE STE. 1200  
COCONUT GROVE, FL 33133 US

**New Principal Place of Business:**

**Current Mailing Address:**

2665 SOUTH BAYSHORE DRIVE STE. 1200  
COCONUT GROVE, FL 33133 US

**New Mailing Address:**

FEI Number: 20-0765669

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BERKOWITZ, JEFFREY  
2665 SOUTH BAYSHORE DRIVE STE. 1200  
COCONUT GROVE, FL 33133 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  
Name: BERKOWITZ, JEFFREY TRUSTEE  
Address: 2665 SOUTH BAYSHORE DRIVE STE. 1200  
City-St-Zip: COCONUT GROVE, FL 33133 US

I hereby 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 L. BERKOWITZ

MGRM

03/22/2010

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