

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000044785

FILED  
Jan 09, 2009  
Secretary of State

Entity Name: SOUTH DIXIE DEVELOPMENT, LLC

**Current Principal Place of Business:**

1481 BELLA VISTA AVE  
CORAL GABLES, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

1481 BELLA VISTA AVE  
CORAL GABLES, FL 33156

**New Mailing Address:**

FEI Number: 02-0727415

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SANTIAGO, WILFREDO  
1481 BELLA VISTA AVE  
CORAL GABLES, FL 33156 US

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

SANTIAGO, WILFREDO G.PT.  
1481 BELLA VISTA AVE  
CORAL GABLES, FL 33156 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: WILFREDO SANTIAGO

01/09/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SANTIAGO, WILFREDO V  
Address: 1481 BELLA VISTAVE.  
City-St-Zip: CORAL GABLES, FL 33156

Title: MGR ( ) Delete  
Name: DAHLAN, THOMAS J  
Address: 8951 SW 85 STREET  
City-St-Zip: MIAMI, FL 33173

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: DAHLAN, THOMAS J  
Address: 8951 SW 85 STREET  
City-St-Zip: MIAMI, FL 33156

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: WILFREDO SANTIAGO

M.PT

01/09/2009

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