2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 01, 2009
Secretary of State

DOCUMENT# L04000050638

Entity Name: THE MIDTOWNER LLC

Current Principal Place of Business:

2665 S. BAYSHORE DRIVE STE. 703
MIAMI, FL 33133

New Principal Place of Business:

999 BRICKELL AVENUE
SUITE 600
MIAMI, FL 33131

Current Mailing Address:

2665 S. BAYSHORE DRIVE STE. 703
MIAMI, FL 33133

New Mailing Address:

999 BRICKELL AVENUE
SUITE 600
MIAMI, FL 33131

FEI Number: 20-1388080 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

POLANSKY, MITCHELL S
2665 S. BAYSHORE DRIVE STE. 703
MIAMI, FL 33133 US

Name and Address of New Registered Agent:

POLANSKY, MITCHELL S ESQ
999 BRICKELL AVENUE
SUITE 600
MIAMI, FL 33131 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: MITCHELL S. POLANSKY 09/01/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: BELSOL, JOSE MANUEL
Address: 2665 S BAYSHORE DRIVE #703
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: BELSOL, JOSE MANUEL
Address: 999 BRICKELL AVENUE, SUITE 600
City-St-Zip: MIAMI, FL 33131

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: JOSE MANUEL BELSOL MGR 09/01/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date