

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000058192

**FILED**  
**Apr 16, 2010**  
**Secretary of State**

**Entity Name:** ADDISON SHOPPING CENTER, L.L.C.

**Current Principal Place of Business:**

3333 NEW HYDE PARK ROAD  
SUITE 100  
NEW HYDE PARK, NY 11042 US

**New Principal Place of Business:**

3333 NEW HYDE PARK ROAD, SUITE 100  
NEW HYDE PARK, NY 11042 US

**Current Mailing Address:**

3333 NEW HYDE PARK ROAD  
SUITE 100  
NEW HYDE PARK, NY 11042 US

**New Mailing Address:**

3333 NEW HYDE PARK ROAD, SUITE 100  
NEW HYDE PARK, NY 11042 US

**FEI Number:** 20-1650773

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: ADDISON SHOPPING CENTER MANAGER, LLC  
Address: 3333 NEW HYDE PARK ROAD, SUITE 100  
City-St-Zip: NEW HYDE PARK, NY 11042 US

Title: MGRM  
Name: ADDISON SHOPPING CENTER MEMBER, LLC  
Address: 3333 NEW HYDE PARK ROAD, SUITE 100  
City-St-Zip: NEW HYDE PARK, NY 11042 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: LAURA LOUIS

POA

04/16/2010

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