

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078510

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: THE ALLEN MORRIS COMPANY AS TRUSTEE FOR SECTION 19 MORTGAGEHOLDERS, LLC

**Current Principal Place of Business:**

121 ALHAMBRA PLAZA  
PENTHOUSE I, SUITE 1600  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

121 ALHAMBRA PLAZA  
PENTHOUSE I, SUITE 1600  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

FEI Number: 20-1810805      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RENTZ, R. LARRY  
121 ALHAMBRA PLAZA  
PENTHOUSE I, SUITE 1600  
CORAL GABLES, FL 33134 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: MGR ( ) Delete  
Name: MORRIS, W. ALLEN  
Address: 121 ALHAMBRA PLAZA, PH I, SUITE 1600  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR ( ) Delete  
Name: GRAHAM, DALE I  
Address: 121 ALHAMBRA PLAZA, PH I, SUITE 1600  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR ( ) Delete  
Name: GIL, YAZMIN  
Address: 121 ALHAMBRA PLAZA, PH I, SUITE 1600  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGR ( ) Delete  
Name: RENTZ, R. LARRY  
Address: 121 ALHAMBRA PLAZA, PH I, SUITE 1600  
City-St-Zip: CORAL GABLES, FL 33134 US

**ADDITIONS/CHANGES:**

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

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

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

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

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: YAZMIN GIL

T

04/21/2009

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