

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 19, 2008 8:00 am
Secretary of State

02-19-2008 90063 034 ***138.75

DOCUMENT # L04000084023

1. Entity Name
PACE REALTY ADVISORS, LLC



Principal Place of Business
**4425 PONCE DE LEON BLVD., 4TH FLOOR
C/O BAYVIEW FINANCIAL, L.P.
CORAL GABLES, FL 33146**

Mailing Address
**4425 PONCE DE LEON BLVD., 4TH FLOOR
C/O BAYVIEW FINANCIAL, L.P.
CORAL GABLES, FL 33146**

600003117



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02012008 Chg-LLC CR2E083 (12/06)

4. FEI Number
56-2495959

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BOMSTEIN, BRIAN E
4425 PONCE DE LEON BLVD., 4TH FLOOR
C/O BAYVIEW FINANCIAL, L.P.
CORAL GABLES, FL 33146**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME	MGRP ERTEL, DAVID	<input type="checkbox"/> Delete
STREET ADDRESS	4425 PONCE DE LEON BLVD 4TH FL	
CITY-ST-ZIP	MIAMI, FL 33146	
TITLE NAME	MGRS QUINT, DAVID	<input type="checkbox"/> Delete
STREET ADDRESS	4425 PONCE DE LEON BLVD 4TH FL	
CITY-ST-ZIP	MIAMI, FL 33146	
TITLE NAME	MGRS OPPENHEIM, ROBERT	<input type="checkbox"/> Delete
STREET ADDRESS	4425 PONCE DE LEON BLVD 4TH FL	
CITY-ST-ZIP	MIAMI, FL 33146	
TITLE NAME	V YURKON, MATT	<input type="checkbox"/> Delete
STREET ADDRESS	4425 PONCE DE LEON BLVD 4TH FL	
CITY-ST-ZIP	MIAMI, FL 33146	
TITLE NAME	SVPT WEGNER, ROBERT A	<input type="checkbox"/> Delete
STREET ADDRESS	4425 PONCE DE LEON BLVD 4TH FL	
CITY-ST-ZIP	MIAMI, FL 33146	
TITLE NAME	SVPA FISCHER, JOHN H	<input type="checkbox"/> Delete
STREET ADDRESS	4425 PONCE DE LEON BLVD 4TH FL	
CITY-ST-ZIP	MIAMI, FL 33146	

10. ADDITIONS/CHANGES

TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	SV QUINT, DAVID	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	4425 Ponce de Leon Blvd, 4th Fl	
CITY-ST-ZIP	CORAL GABLES FL 33146	
TITLE NAME	SV SHOER, HOWARD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	4425 Ponce de Leon Blvd, 4th Fl	
CITY-ST-ZIP	CORAL GABLES FL 33146	
TITLE NAME	V LOMINAC, EVE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	4425 Ponce de Leon Blvd, 4th Fl	
CITY-ST-ZIP	CORAL GABLES FL 33146	
TITLE NAME	V WILLIAMS, MARVIN	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	4425 Ponce de Leon Blvd, 4th Fl	
CITY-ST-ZIP	CORAL GABLES FL 33146	
TITLE NAME	V/AS CARR, THOMAS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	4425 Ponce de Leon Blvd, 4th Fl	
CITY-ST-ZIP	CORAL GABLES FL 33146	

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

2/4/08
Date

305-854-8880
Daytime Phone #

BRIAN E. BOMSTEIN, SVPT

ATTACHMENT

60009117

10. PACE REALTY ADVISORS, LLC
DOCUMENT NO. L04000084023

TITLE	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	JOLIS, RICHARD		
STREET ADDRESS	4425 PONCE DE LEON BLVD., 4 TH FLOOR		
CITY-ST-ZIP	CORAL GABLES, FL 33146		

TITLE	V	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	CARR, KEVIN		
STREET ADDRESS	4425 PONCE DE LEON BLVD., 4 TH FLOOR		
CITY-ST-ZIP	CORAL GABLES, FL 33146		