

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 17, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000001437

1. Entity Name
**CREC COLONIAL PROMENADE SHOPPING CENTER GP,
LLC**



Principal Place of Business
**2121 PONCE DE LEON BLVD 1250
MIAMI, FL 33134**

Mailing Address
**2121 PONCE DE LEON BLVD 1250
MIAMI, FL 33134**



04152008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2223056

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**STEARNS WEAVER MILLER WEISSLER ALHADEFF &
SITTERSON, P.A. 150 WEST FLAGLER ST., STE
2200
MIAMI, FL 33130**

**DO NOT WRITE
IN THIS SPACE**

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, and corresponding name of registered agent, shall be a member of the LLC. Registered Agent signature is not a requirement.)

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

U000000902100
04/29/08-80095-017 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	WEISER, WARREN
STREET ADDRESS	2121 PONCE DE LEON BLVD 1250
CITY-ST-ZIP	MIAMI, FL 33134
TITLE	MGRM
NAME	BROOKS, CAROL
STREET ADDRESS	2121 PONCE DE LEON BLVD 1250
CITY-ST-ZIP	MIAMI, FL 33134
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 I 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: *C. W.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

04/16/08