

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000023014

**FILED**  
**Feb 13, 2010**  
**Secretary of State**

**Entity Name:** PORT ST. LUCIE ONE, LLC

**Current Principal Place of Business:**

3847 CAPE POINT CIR.  
JUPITER, FL 33477

**New Principal Place of Business:**

**Current Mailing Address:**

200 MOTOR PKWY  
D-24  
HAUPPAUGE, NY 11778

**New Mailing Address:**

**FEI Number:** 33-1113288      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

SKOLNICK, SHEILA  
3847 CAPE POINT CIR.  
JUPITER, FL 33477      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:** SKOLNICK, SHEILA  
**Address:** 3847 CAPE POINT CIR.  
**City-St-Zip:** JUPITER, FL 33477

**Title:** MGRM  
**Name:** FULLER, HOWARD  
**Address:** 200 MOTOR PKWY, D-24  
**City-St-Zip:** HAUPPAUGE, NY 11788

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:** HOWARD FULLER

MEMB

02/13/2010

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