

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025317

**FILED**  
**Mar 18, 2009**  
**Secretary of State**

**Entity Name:** EIRE WEST RESIDENTIAL, LLC

**Current Principal Place of Business:**

2799 N.W. BOCA RATON BLVD  
SUITE 205  
BOCA RATON, FL 33433

**New Principal Place of Business:**

**Current Mailing Address:**

2799 N.W. BOCA RATON BLVD  
SUITE 205  
BOCA RATON, FL 33433

**New Mailing Address:**

**FEI Number:** 20-3128973      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

DUNAY, GARY S  
5355 TOWN CENTER ROAD, #801  
BOCA RATON, FL 33486 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 ( ) Delete  
Name: SPILLANE, MARK D  
Address: 2799 NW BOCA RATON BLVD, #205  
City-St-Zip: BOCA RATON, FL 33431

Title: PRES ( ) Delete  
Name: LEVINE, MARIO  
Address: 2799 NW BOCA RATON BLVD #205  
City-St-Zip: BOCA RATON, FL 33431

**ADDITIONS/CHANGES:**

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: MARIO LEVINE

PRES

03/18/2009

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