

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000026111

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: FLORIDA PENINSULA MANAGERS, LLC

**Current Principal Place of Business:**

621 N.W. 53RD STREET  
SUITE 125  
BOCA RATON, FL 33487

**New Principal Place of Business:**

**Current Mailing Address:**

621 N.W. 53RD STREET  
SUITE 125  
BOCA RATON, FL 33487

**New Mailing Address:**

FEI Number: 20-2556113

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GIULIANTI, STACEY A  
621 N.W. 53RD STREET  
SUITE 125  
BOCA RATON, FL 33487 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: MR. ( ) Delete  
Name: ADKINS, PAUL M MANAGER  
Address: 18743 LONG LAKE DRIVE  
City-St-Zip: BOCA RATON, FL 33496 US

Title: MR. ( ) Delete  
Name: CANTOR, GARY M MANAGER  
Address: 7 OCEAN HARBOUR CIRCLE  
City-St-Zip: OCEAN RIDGE, FL 33435 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ADKINS, PAUL M MANAGER  
Address: 18743 LONG LAKE DRIVE  
City-St-Zip: BOCA RATON, FL 33496 US

Title: MGR (X) Change ( ) Addition  
Name: CANTOR, GARY M MANAGER  
Address: 7 OCEAN HARBOUR CIRCLE  
City-St-Zip: OCEAN RIDGE, FL 33435 US

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: GARY M CANTOR

MGR

03/23/2009

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