2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 18, 2008
Secretary of State

DOCUMENT# L05000027335

Entity Name: CITY CENTER RESIDENCES, LLC

Current Principal Place of Business:

847 NORTH COLLIER BLVD.
MARCO ISLAND, FL 34145

New Principal Place of Business:

1001 N. BARFIELD DR.
MARCO ISLAND, FL 34145

Current Mailing Address:

847 NORTH COLLIER BLVD.
MARCO ISLAND, FL 34145

New Mailing Address:

P.O. BOX 1909
MARCO ISLAND, FL 34146

FEI Number: 61-1474559 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

DUFAULT, DANIEL J SR
847 N. COLLIER BLVD.
MARCO ISLAND, FL 34145 US

Name and Address of New Registered Agent:

DUFAULT, DANIEL J SR
1001 N. BARFIELD DR.
MARCO ISLAND, FL 34145 US

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: 08/18/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: DUFAULT, DANIEL J SR
Address: 847 NORTH COLLIER BLVD.
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGRM ( ) Delete
Name: DUFAULT, DANIEL J JR
Address: 847 NORTH COLLIER BLVD.
City-St-Zip: MARCO ISLAND, FL 34145

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: DUFAULT, DANIEL J SR
Address: 1001 N. BARFIELD DR.
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGRM (X) Change ( ) Addition
Name: DUFAULT, DANIEL J JR
Address: 1001 N. BARFIELD DR.
City-St-Zip: MARCO ISLAND, FL 34145

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: DAN DUFAULT SR MGRM 08/18/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date