2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# L05000040627

Entity Name: GRIFFIN POINTE GP, LLC

Current Principal Place of Business:

1800 SOUTHEAST 10TH AVENUE
SUITE 210
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

1800 SOUTHEAST 10TH AVENUE
SUITE 210
FORT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KOLK, GLENN G
520 BRICKELL KEY DRIVE
SUITE 1606
MIAMI, FL 33131 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:	MGR	( ) Delete
Name:	HALLIDAY, JOHN C III	
Address:	1800 SOUTHEAST 10TH AVENUE, SUITE 210	
City-St-Zip:	FORT LAUDERDALE, FL 33316 US	
Title:	MGR	( ) Delete
Name:	WINCH, JAMES S	
Address:	1800 SOUTHEAST 10TH AVENUE, SUITE 210	
City-St-Zip:	FORT LAUDERDALE, FL 33316	
Title:	MGR	( ) Delete
Name:	KOLK, GLENN G	
Address:	520 BRICKELL KEY DRIVE, SUITE 1606	
City-St-Zip:	MIAMI, FL 33131	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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: GLENN G. KOLK MGR 04/29/2009

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