

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000083205

FILED  
Jan 07, 2009  
Secretary of State

**Entity Name:** PORTOFINO PLAZA (PORT ST. LUCIE), L.L.C.

**Current Principal Place of Business:**

7540 NW 5TH ST, STE 1  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

7540 NW 5TH ST, STE 1  
PLANTATION, FL 33317

**New Mailing Address:**

**FEI Number:** 72-1609769

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STEIN, WARREN J  
13248 WEST BROWARD BOULEVARD  
PLANTATION, FL 33313 US

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

STEIN, WARREN J  
7540 NW 5TH ST., STE 1  
PLANTATION, FL 33317 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:**

01/07/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: STEIN, WARREN J  
Address: 13248 WEST BROWARD BOULEVARD  
City-St-Zip: PLANTATION, FL 33313

Title: MGR ( ) Delete  
Name: BILIA, DAVID  
Address: 4917 NORTH UNIVERSITY DRIVE  
City-St-Zip: LAUDERHILL, FL 33351

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: STEIN, WARREN J  
Address: 7540 NW 5TH ST., STE1  
City-St-Zip: PLANTATION, FL 33317

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:** WARREN J. STEIN

MGR

01/07/2009

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