

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000094135

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**Entity Name:** MIRAMAR COROSSINGS PARCEL 2, LLC

**Current Principal Place of Business:**

1575 SAN IGNACIO AVE.  
SUITE 400  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

1575 SAN IGNACIO AVE.  
SUITE 400  
CORAL GABLES, FL 33146

**New Mailing Address:**

**FEI Number:** 65-1290869

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DKRLD, INC.  
201 ALHAMBRA CIR. SUITE 1102  
CORAL GABLES, FL 33134 US

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

INVESTMENT MANAGEMENT ASSOCIATES, INC.  
1575 SAN IGNACIO AVENUE  
SUITE 400  
CORAL GABLES, FL 33146 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: RALPH SHEPPARD, DP

02/23/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MM  
Name: SHEPPARD, RALPH  
Address: 1575 SAN IGNACIO AVENUE, SUITE 400  
City-St-Zip: CORAL GABLES, FL 33146

Title: MM  
Name: BAUMGARD, DANIEL  
Address: 1575 SAN IGNACIO AVENUE, SUITE 400  
City-St-Zip: CORAL GABLES, FL 33146

I hereby 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: RALPH SHEPPARD

MM

02/23/2011

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