

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000109531

FILED
Jun 22, 2009
Secretary of State

Entity Name: BAY STATE REALTY VENTURES ESTERO WEST LLC

Current Principal Place of Business:

18205 BISCAYNE BLVD.
2201
AVENTURA, FL 33160

New Principal Place of Business:

18205 BISCAYNE BLVD.
2213
AVENTURA, FL 33160

Current Mailing Address:

18205 BISCAYNE BLVD.
2201
AVENTURA, FL 33160

New Mailing Address:

18205 BISCAYNE BLVD.
2213
AVENTURA, FL 33160

FEI Number: 20-3772966 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:

COHEN, ALAN
18205 BISCAYNE BLVD.
2201
AVENTURA, FL 33160 US

Name and Address of New Registered Agent:

COHEN, ALAN
18205 BISCAYNE BLVD.
2213
AVENTURA, FL 33160 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:

06/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COHEN, ALAN
Address: 18205 BISCAYNE BLVD #2213
City-St-Zip: AVENTURA, FL 33160

Title: MGR () Delete
Name: KAUFMAN, KAREN S
Address: 19573 ESTUARY DRIVE
City-St-Zip: BOCA RATON, FL 33498

ADDITIONS/CHANGES:

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: ALAN COHEN

MGR

06/22/2009

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