

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000002735

Entity Name: PEEBLES URBAN, LLC

FILED
May 08, 2008
Secretary of State

Current Principal Place of Business:

550 BILTMORE WAY, SUITE 970
CORAL GABLES, FL 333134

New Principal Place of Business:

Current Mailing Address:

550 BILTMORE WAY, SUITE 970
CORAL GABLES, FL 333134

New Mailing Address:

FEI Number: 04-3842539 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:

Name and Address of New Registered Agent:

M & W AGENTS, INC
BOCA CORP CENTER, STE 107
2101 CORPORATE BLVD
BOCA RATON, FL 33431 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PEEBLES, R.DONAHUE
Address: 550 BILTMORE WAY STE 970
City-St-Zip: CORAL GABLES, FL 33134

Title: P () Delete
Name: HOFFMAN, STUART K
Address: 550 BILTMORE WAY STE 970
City-St-Zip: CORAL GABLES, FL 33134

Title: V () Delete
Name: GRIMM, DANIEL H
Address: 550 BILTMORE WAY STE 970
City-St-Zip: CORAL GABLES, FL 33134

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: STUART HOFFMAN

P

05/08/2008

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