

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000013828

**FILED**  
**Feb 18, 2010**  
**Secretary of State**

**Entity Name:** CROCKER-WPB CITY PLACE LLC

**Current Principal Place of Business:**

C/O CROCKER PARTNERS LLC  
225 NE MIZNER BLVD. SUITE 200  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

C/O CROCKER PARTNERS LLC  
225 NE MIZNER BLVD. SUITE 200  
BOCA RATON, FL 33432

**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:**

GRAGG, K. LAWRENCE  
200 S. BISCAYNE BLVD.  
SUITE 4900  
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: MGRM  
Name: CROCKER, THOMAS J  
Address: 225 NE MIZNER BLVD SUITE 200  
City-St-Zip: BOCA RATON, FL 33432

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: THOMAS J. CROCKER                      MGRM                      02/18/2010

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