

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000018447

**FILED**  
**Feb 04, 2009**  
**Secretary of State**

**Entity Name:** MARINER'S SQUARE MANAGEMENT LLC

**Current Principal Place of Business:**

4309 VIA GLORIETA  
SANTA BARBARA, CA 93110 US

**New Principal Place of Business:**

**Current Mailing Address:**

4309 VIA GLORIETA  
SANTA BARBARA, CA 93110 US

**New Mailing Address:**

FEI Number: 20-4385014      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JOHNSON, TIMOTHY  
1131 NO. WESTSHORE BLVD.  
SUITE 201  
TAMPA, FL 33607 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: MGR ( ) Delete  
Name: DWYER, STEPHEN  
Address: 4309 VIA GLORIETA  
City-St-Zip: SANTA BARBARA, CA 93110 US

Title: MGR ( ) Delete  
Name: DWYER, SUSAN  
Address: 4309 VIA GLORIETA  
City-St-Zip: SANTA BARBARA, CA 93110 US

**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: S. DWYER

MBR.

02/04/2009

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