

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000027664

FILED
Aug 31, 2008
Secretary of State

Entity Name: 1203 TRUMP LLC

Current Principal Place of Business:

1640 NIXON DRIVE, SUITE 320
MOORESTOWN, NJ 08057 US

New Principal Place of Business:

Current Mailing Address:

1640 NIXON DRIVE, SUITE 320
MOORESTOWN, NJ 08057 US

New Mailing Address:

FEI Number: 20-4601633 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:

RADONICH, CARINA
TRUMP INTERNATIONAL
945 EAST LAS OLAS BLVD
FORT LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

NOLA, SIMONS
2855 SILVER RIDGE DRIVE
ORLANDO, FL 32818 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: NOLA SIMONS

08/31/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CROOKS, MONIKA
Address: 1640 NIXON DRIVE, SUITE 320
City-St-Zip: MOORESTOWN, NJ 08057 US

Title: MGRM () Delete
Name: WISE, ANDREW
Address: 142-26 230RD PLACE
City-St-Zip: JAMAICA, NY 11413 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: WISE, ANDREW
Address: 142-26 230TH PLACE
City-St-Zip: JAMAICA, NY 11413 US

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: ANDREW WISE

MGR

08/31/2008

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