

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000044130

FILED
May 14, 2009
Secretary of State**Entity Name:** OLD CUTLER PLACE, LLC**Current Principal Place of Business:**11225 NW 131 ST
MEDLEY, FL 33178**New Principal Place of Business:****Current Mailing Address:**11225 NW 131 ST
MEDLEY, FL 33178**New Mailing Address:****FEI Number:** 20-4775620**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**CRAWFORD, GALE S
11225 NW 131 ST
MEDLEY, FL 33178 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 () Delete
Name: ZUNJIC, BRANKO
Address: 11225 NW 131 ST
City-St-Zip: MEDLEY, FL 33178**Title:** MGRM () Delete
Name: ADISSI, ALFREDO
Address: 11225 NW 131 ST
City-St-Zip: MEDLEY, FL 33178**ADDITIONS/CHANGES:****Title:** MGRM (X) Change () Addition
Name: INGLETTO, ROBERTA
Address: 11225 NW 131 ST
City-St-Zip: MEDLEY, FL 33178**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: ALFREDO ADISSI

MGRM

05/14/2009

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