

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000044782

FILED  
Feb 09, 2009  
Secretary of State

Entity Name: CD119 CENTRAL PARK, LLC

**Current Principal Place of Business:**

1350 E. NEWPORT CENTER DRIVE, SUITE 206  
DEERFIELD BEACH, FL 33442

**New Principal Place of Business:**

**Current Mailing Address:**

1350 E. NEWPORT CENTER DRIVE, SUITE 206  
DEERFIELD BEACH, FL 33442

**New Mailing Address:**

FEI Number: 20-4839688

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

KASSOF, LINDA G  
1350 E. NEWPORT CENTER DRIVE, SUITE 206  
DEERFIELD BEACH, FL 33442 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: REIBLING, LORENZ  
Address: 112 MILK STREET  
City-St-Zip: BOSTON, MA 02109

Title: MGR ( ) Delete  
Name: REIBLING, GUENTHER  
Address: 1350 E. NEWPORT CENTER DRIVE, SUITE 206  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: MGR ( ) Delete  
Name: MERRIGAN, PETER  
Address: 112 MILK STREET  
City-St-Zip: BOSTON, MA 02109

Title: MGR ( ) Delete  
Name: KASSOF, LINDA G  
Address: 1350 E. NEWPORT CENTER DRIVE, SUITE 206  
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: MGR ( ) Delete  
Name: MCFADDEN, JEFF  
Address: 1560 ORANGE AVENUE, SUITE 410  
City-St-Zip: WINTER PARK, FL 32789

**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:

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: LINDA G. KASSOF

MGR

02/09/2009

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