

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000046755

Entity Name: PINES CITY CENTER, LLC

FILED  
Mar 08, 2011  
Secretary of State

**Current Principal Place of Business:**

ATTN: RUSS HAMLIN  
555 WINDERLEY PLACE, SUITE 400  
MAITLAND, FL 32751

**New Principal Place of Business:**

5535 OSPREY ISLE LN  
ORLANDO, FL 32819

**Current Mailing Address:**

ATTN: RUSS HAMLIN  
555 WINDERLEY PLACE, SUITE 400  
MAITLAND, FL 32751

**New Mailing Address:**

5535 OSPREY ISLE LN  
ORLANDO, FL 32819

FEI Number: 20-4813604

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPDIRECT AGENTS, INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 US

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

DWIGHT, SAATHOFF  
5535 OSPREY ISLE LN  
ORLANDO, FL 32819 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: DWIGHT SAATHOFF

03/08/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SNOW, KATHLEEN E  
Address: 5535 OSPREY ISLE LN  
City-St-Zip: ORLANDO, FL 32819

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: KATHLEEN SNOW

MGR

03/08/2011

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