

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000059948

Entity Name: W/B INDRIO ROAD GP, LLC

FILED  
Feb 23, 2010  
Secretary of State

**Current Principal Place of Business:**

2121 PONCE DE LEON BLVD., SUITE 1250  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2121 PONCE DE LEON BLVD., SUITE 1250  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 20-5059706

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEARNS WEAVER MILLER WEISSLER ALHADEFF &  
SITTERSON, P.A., C/O RICHARD E. SCHATZ  
150 WEST FLAGLER STREET, SUITE 2200  
MIAMI, FL 33130 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  
Name: WEISER, WARREN  
Address: 2121 PONCE DE LEON BLVD #1250  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM  
Name: BROOKS, CAROL  
Address: 2121 PONCE DE LEON BLVD #1250  
City-St-Zip: CORAL GABLES, FL 33134

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: TAMY CONRADO

AP

02/23/2010

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