

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000099198

FILED
Jan 24, 2011
Secretary of State

Entity Name: STILES CSI MM, LLC

Current Principal Place of Business:

300 S.E. 2ND STREET, C/O STILES CORP.
ATTN: DONNA FLOREK
FT. LAUDERDALE, FL 33301

New Principal Place of Business:

301 EAST LAS OLAS BLVD., C/O STILES CORP.
ATTN: DONNA FLOREK
FT. LAUDERDALE, FL 33301 US

Current Mailing Address:

300 S.E. 2ND STREET, C/O STILES CORP.
ATTN: DONNA FLOREK
FT. LAUDERDALE, FL 33301

New Mailing Address:

301 EAST LAS OLAS BLVD., C/O STILES CORP.
ATTN: DONNA FLOREK
FT. LAUDERDALE, FL 33301 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLOREK, DONNA
300 S.E. 2ND STREET, C/O STILES CORP.
FT. LAUDERDALE, FL 33301 US

Name and Address of New Registered Agent:

FLOREK, DONNA
301 EAST LAS OLAS BLVD., C/O STILES CORP.
FT. LAUDERDALE, FL 33301 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:

01/24/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: STILES CAPITAL PARTNERS I, LTD.
Address: 301 EAST LAS OLAS BLVD.
City-St-Zip: FORT LAUDERDALE, FL 33301

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: TERRY W. STILES

MGR

01/24/2011

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