

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000106042

FILED
Feb 12, 2008
Secretary of State

Entity Name: RM AT STUART RETAIL CENTER, LLC

Current Principal Place of Business:

1000 SOUTH POINT DRIVE #2502
MIAMI, FL 33139

New Principal Place of Business:

1000 S. POINTE DRIVE
STE 2502
MIAMI, FL 33139 US

Current Mailing Address:

1000 SOUTH POINT DRIVE #2502
MIAMI, FL 33139

New Mailing Address:

1000 S. POINTE DR
STE 2502
MAIMI BEACH, FL 33139 US

FEI Number: 65-0551926

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MADRIS, RUSSELL L
1000 SOUTH POINT DRIVE #2502
MIAMI, FL 33139 US

Name and Address of New Registered Agent:

MADRIS, RUSSELL
1000 S. POINTE DRIVE
2502
MIAMI, FL 33139 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: RUSSELL MADRIS

02/12/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MADRIS, RUSSELL L
Address: 1000 SOUTH POINT DRIVE #2502
City-St-Zip: MIAMI, FL 33139

Title: MGR (X) Delete
Name: MODIST, SCOTT
Address: 14980 HORSESHOE TRACE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: MADRIS, RUSSELL
Address: 1000 S. POINTE DR # 2502
City-St-Zip: MIAMI BEACH, FL 33139

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: RUSSELL MADRIS

MGR

02/12/2008

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