

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000120880

FILED
Mar 19, 2009
Secretary of State

Entity Name: COBBLESTONE PROPERTY, LLC

Current Principal Place of Business:

1291 SW 27 AVENUE
DEERFIELD BEACH, FL 33442

New Principal Place of Business:

4100 NW 101 DRIVE
CORAL SPRINGS, FL 33065

Current Mailing Address:

1291 SW 27 AVENUE
DEERFIELD BEACH, FL 33442

New Mailing Address:

4100 NW 101 DRIVE
CORAL SPRINGS, FL 33065

FEI Number: 20-8073234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIFSUD, PIERRE A
1291 SW 27 AVENUE
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: MIFSUD, PIERRE A
Address: 1291 SW 27 AVENUE
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: MGR () Delete
Name: MIFSUD, MARIE-CLAUDE
Address: 1291 SW 27 AVENUE
City-St-Zip: DEERFIELD BEACH, FL 33442

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MIFSUD, PIERRE A
Address: 4100 NW 101 DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGR (X) Change () Addition
Name: MIFSUD, MARIE-CLAUDE
Address: 4100 NW 101 DRIVE
City-St-Zip: CORAL SPRINGS, FL 33065

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: MARIE-CLAUDE MIFSUD

MGR

03/19/2009

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