2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2009
Secretary of State

DOCUMENT# L07000031463

Entity Name: ASPEN RESIDENCE, LLC

Current Principal Place of Business:

11111 BISCAYNE BOULEVARD #1657
NORTH MIAMI, FL 33181 US

New Principal Place of Business:

605 OCEAN BOULEVARD
GOLDEN BEACH, FL 33160 US

Current Mailing Address:

11111 BISCAYNE BOULEVARD #1657
NORTH MIAMI, FL 33181 US

New Mailing Address:

605 OCEAN BOULEVARD
GOLDEN BEACH, FL 33160 US

FEI Number: 20-8706892 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEVINE, NORMAN
601 NE 125 ST STE 107
MIAMI, FL 33161 US

Name and Address of New Registered Agent:

LEVINE, NORMAN CPA
901 NE 125 STREET
SUITE 107
NORTH MIAMI, FL 33161 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: NORMAN LEVINE, CPA 04/07/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: KAYE, BRUCE
Address: 11111 BISCAYNE BOULEVARD #1657
City-St-Zip: NORTH MIAMI, FL 33181 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: KAYE, BRUCE
Address: 605 OCEAN BOULEVARD
City-St-Zip: GOLDEN BEACH, FL 33160 US

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: BRUCE KAYE MGRM 04/07/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date