2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 25, 2009
Secretary of State

DOCUMENT# L07000035558

Entity Name: LAS FLORES HOLDINGS, LLC

Current Principal Place of Business:

1226 N TAMIAMI TRAIL, STE 301
SARASOTA, FL 32436

New Principal Place of Business:

Current Mailing Address:

1226 N TAMIAMI TRAIL, STE 301
SARASOTA, FL 32436

New Mailing Address:

FEI Number: 26-6635614 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RYSKAMP, PATRICK W
200 SOUTH ORANGE AVE
SARASOTA, FL 34236 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: ROSKAMP, ROBERT G
Address: 2040 WHITFIELD AVE
City-St-Zip: SARASOTA, FL 34243

Title: MGR ( ) Delete
Name: HOWELL, DAVID M
Address: 12002 MIRAMAR PKWY
City-St-Zip: HOLLYWOOD, FL 33025

Title: MGR ( ) Delete
Name: HOWELL, STEVEN
Address: 12002 MIRAMAR PKWY
City-St-Zip: HOLLYWOOD, FL 33025

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: ROSKAMP, ROBERT G
Address: 1226 N TAMIAMI TRAIL STE. 301
City-St-Zip: SARASOTA, FL 34236

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ROBERT G ROSKAMP MGR 02/25/2009

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