

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000038655

Entity Name: LA RIBERA, LLC

FILED  
Jan 22, 2009  
Secretary of State

## Current Principal Place of Business:

3801 PGA BOULEVARD  
SUITE 604  
PALM BEACH GARDENS, FL 33410 US

## Current Mailing Address:

3801 PGA BOULEVARD  
SUITE 604  
PALM BEACH GARDENS, FL 33410 US

## New Principal Place of Business:

4440 PGA BLVD  
SUITE 405  
PALM BEACH GARDENS, FL 33410 US

## New Mailing Address:

4440 PGA BLVD  
SUITE 405  
PALM BEACH GARDENS, FL 33410 US

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

## Name and Address of Current Registered Agent:

GAROFALO, ROSARIA  
4440 PGA BOULEVARD  
SUITE 405  
PALM BEACH GARDENS, FL 33410 US

## Name and Address of New Registered Agent:

ROGERS, CYNTHIA M  
4440 PGA BOULEVARD  
SUITE 405  
PALM BEACH GARDENS, FL 33410 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: CYNTHIA M ROGERS

01/22/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: GAROFALO, ROSARIA  
Address: 4440 PGA BOULEVARD, SUITE 405  
City-St-Zip: PALM BEACH GARDENS, FL 33410 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ARIAS, QUERUBE  
Address: 210 KAWAMA LANE  
City-St-Zip: PALM BEACH, FL 33480 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: CYNTHIA M ROGERS

RA

01/22/2009

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