

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000044160

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** CORAL GABLES ENTERPRISES, LLC

**Current Principal Place of Business:**

2222 PONCE DE LEON BLVD  
6TH FLOOR  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

2222 PONCE DE LEON BLVD  
6TH FLOOR  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 20-8925751

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GUILFORD, FRANK W JR.  
2222 PONCE DE LEON BLVD  
6TH FLOOR  
CORAL GABLES, FL 33134 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: MGRM  
Name: GUILFORD, FRANK W JR.  
Address: 2222 PONCE DE LEON BLVD;6TH FLOOR  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM  
Name: GUILFORD, FRANK W III  
Address: 2222 PONCE DE LEON BLVD;6TH FLOOR  
City-St-Zip: CORAL GABLES, FL 33134

I hereby 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: FRANK W. GUILFORD, JR.

MGRM

04/30/2010

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