

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000055178

FILED  
Mar 23, 2012  
Secretary of State

Entity Name: CLERMONT RETAIL DEVELOPERS, LLC

## Current Principal Place of Business:

% DEVELOPERS REALTY CORPORATION  
1224 MILL STREET, BUILDING D, SUITE 103  
EAST BERLIN, CT 06023

## New Principal Place of Business:

C/O DEVELOPERS REALTY CORPORATION  
1224 MILL STREET, BUILDING D, SUITE 103  
EAST BERLIN, CT 06023

## Current Mailing Address:

% DEVELOPERS REALTY CORPORATION  
1224 MILL STREET, BUILDING D, SUITE 103  
EAST BERLIN, CT 06023

## New Mailing Address:

C/O DEVELOPERS REALTY CORPORATION  
1224 MILL STREET, BUILDING D, SUITE 103  
EAST BERLIN, CT 06023

FEI Number: 26-0203913

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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  
Name: EISENBAUM, WAYNE  
Address: 1224 MILL STREET, BUILDING D, SUITE 103  
City-St-Zip: EAST BERLIN, CT 06023

Title: MGR  
Name: EISENBAUM, ALAN  
Address: 1224 MILL STREET, BUILDING D, SUITE 103  
City-St-Zip: EAST BERLIN, CT 06023

Title: MGR  
Name: HELENE, ALAN  
Address: 1224 MILL STREET, BUILDING D, SUITE 103  
City-St-Zip: EAST BERLIN, CT 06023

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: WAYNE EISENBAUM

MGR

03/23/2012

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