

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000057944

Entity Name: PMCRI INVESTMENT LLC

FILED  
Jan 13, 2009  
Secretary of State

## Current Principal Place of Business:

401 E. LAS OLAS BLVD., SUITE 2000  
FORT LAUDERDALE, FL 33301

## New Principal Place of Business:

401 E. LAS OLAS BLVD.  
SUITE 2000  
FORT LAUDERDALE, FL 33301 US

## Current Mailing Address:

401 E. LAS OLAS BLVD., SUITE 2000  
FORT LAUDERDALE, FL 33301

## New Mailing Address:

401 E. LAS OLAS BLVD.  
SUITE 2000  
FORT LAUDERDALE, FL 33301 US

FEI Number: 26-0281095

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GAVSIE, BRIAN  
401 E. LAS OLAS BLVD., SUITE 2000  
FORT LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

GAVSIE, BRIAN J  
401 E. LAS OLAS BLVD.  
SUITE 2000  
FORT LAUDERDALE, FL 33301 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: BRIAN J. GAVSIE

01/13/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MR. ( ) Delete  
Name: GAVSIE, BRIAN J  
Address: 401 E. LAS OLAS BLVD., SUITE 2000  
City-St-Zip: FORT LAUDERDALE, FL 33301

## ADDITIONS/CHANGES:

Title: MR. (X) Change ( ) Addition  
Name: GAVSIE, BRIAN J  
Address: 401 E. LAS OLAS BLVD., SUITE 2000  
City-St-Zip: FORT LAUDERDALE, FL 33301 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: BRIAN J. GAVSIE

MR.

01/13/2009

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