

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000064423

FILED
Mar 20, 2009
Secretary of State

Entity Name: 4210 LAGUNA, LLC

Current Principal Place of Business:

366 ALTARA AVENUE
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

366 ALTARA AVENUE
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 26-0431914

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODON, MARY LOU
2222 PONCE DE LEON BLVD.
PENTHOUSE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

FULLERTON, JOHN P
366 ALTARA AVENUE
CORAL GABLES, FL 33146 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: JOHN P. FULLERTON

03/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FULLERTON, JOHN P
Address: 366 ALTARA AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM () Delete
Name: FULLERTON, LIZET V
Address: 366 ALTARA AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM () Delete
Name: DIAZ, JULIO S
Address: 366 ALTARA AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM () Delete
Name: MARIA PILAR, DIAZ
Address: 366 ALTARA AVENUE
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

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

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

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: JOHN P. FULLERTON

PRES

03/20/2009

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