

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000074228

FILED  
May 04, 2010  
Secretary of State

**Entity Name:** LIONS GATE APARTMENT MANAGEMENT, L.L.C.

**Current Principal Place of Business:**

23123 SOUTH STATE ROAD 7, #240  
BOCA RATON, FL 33428

**New Principal Place of Business:**

**Current Mailing Address:**

23123 SOUTH STATE ROAD 7, #240  
BOCA RATON, FL 33428

**New Mailing Address:**

FEI Number: 06-1822369      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

GORDON, JAMES N  
23123 SOUTH STATE ROAD 7, #240  
BOCA RATON, FL 33428      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KROENKE, E. STANLEY  
Address: 211 NORTH STADIUM BLVD.  
City-St-Zip: COLUMBIA, MD 65203

Title: MGRM  
Name: GORDON, JAMES N  
Address: 23123 SOUTH STATE ROAD 7, #240  
City-St-Zip: BOCA RATON, FL 33428

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: JAMES N. GORDON

MGRM

05/04/2010

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