

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000090419

Entity Name: BKRT EAST TOWN, LLC

FILED
Jan 18, 2009
Secretary of State

Current Principal Place of Business:

ONE NORTH CLEMATIS STREET
SUITE 305
WEST PALM BEACH, FL 33401

Current Mailing Address:

ONE NORTH CLEMATIS STREET
SUITE 305
WEST PALM BEACH, FL 33401

New Principal Place of Business:

340 ROYAL POINCIANA WAY
SUITE 316
PALM BEACH, FL 33480 US

New Mailing Address:

340 ROYAL POINCIANA WAY
SUITE 316
PALM BEACH, FL 33480 US

FEI Number: 26-0858701

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOSOY, BRIAN D TRUSTEE
ONE NORTH CLEMATIS STREET
SUITE 305
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

KOSOY, BRIAN D TRUSTEE
340 ROYAL POINCIANA WAY
SUITE 316
PALM BEACH, FL 33480 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:

01/18/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BRIAN D. KOSOY REVOC, ABLE TRUST
Address: ONE NORTH CLEMATIS STREET - SUITE 305
City-St-Zip: WEST PALM BEACH, FL 33401

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BRIAN D. KOSOY REVOC, ABLE TRUST
Address: 340 ROYAL POINCIANA WAY SUITE 316
City-St-Zip: PALM BEACH, FL 33480

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 KOSOY

TRUS

01/18/2009

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