

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000090876

FILED
Feb 17, 2009
Secretary of State

Entity Name: FLORIDA CENTER FOR INNOVATION AT TRADITION, LLC

Current Principal Place of Business:

10521 S.W. VILLAGE CENTER DRIVE
SUITE 201
PORT ST. LUCIE, FL 34987

New Principal Place of Business:

Current Mailing Address:

10521 S.W. VILLAGE CENTER DRIVE
SUITE 201
PORT ST. LUCIE, FL 34987

New Mailing Address:

FEI Number: 26-0846239

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT 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: MGRM () Delete
Name: HORIZONS ST. LUCIE D, EVELOPMENT, LL C
Address: 10521 S.W. VILLAGE CENTER DRIVE, SUITE 201
City-St-Zip: PORT ST. LUCIE, FL 34987

ADDITIONS/CHANGES:

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: JAMES H ANDERSON

EVP

02/17/2009

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