2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L07000100576

Entity Name: COMMUNITY ASSOCIATION SYNDICATE LLC

Current Principal Place of Business:

215 NORTH FEDERAL HIGHWAY
DANIA BEACH, FL 33004

New Principal Place of Business:

101 NORTH OCEAN DRIVE
OCEANWALK MALL SUITE 209
HOLLYWOOD, FL 33019

Current Mailing Address:

215 NORTH FEDERAL HIGHWAY
DANIA BEACH, FL 33004

New Mailing Address:

101 NORTH OCEAN DRIVE
OCEANWALK MALL SUITE 209
HOLLYWOOD, FL 33019

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

S. ALAN JOHNSON & ASSOCIATES, LLC
215 NORTH FEDERAL HIGHWAY
DANIA BEACH, FL 33004 US

Name and Address of New Registered Agent:

S. ALAN JOHNSON & ASSOCIATES, LLC
101 NORTH OCEAN DRIVE
OCEANWALK MALL SUITE 209
HOLLYWOOD, FL 33019 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: S. ALAN JOHNSON 04/30/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: JOHNSON, S. ALAN
Address: 215 NORTH FEDERAL HIGHWAY
City-St-Zip: DANIA BEACH, FL 33004

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: JOHNSON, S. ALAN
Address: 101 NORTH OCEAN DRIVE, OCEANWALK SUITE 209
City-St-Zip: HOLLYWOOD, FL 33019

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: S. ALAN JOHNSON MGRM 04/30/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date