2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# L07000107894

Entity Name: 109 STERNS ST., LLC

Current Principal Place of Business:

% MARILYN EFRON
1005 DEL HARBOUR DRIVE
DELRAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

% MARILYN EFRON
1005 DEL HARBOUR DRIVE
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 35-2341780 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DANIELS, STEVEN L ESQ.
ARNSTEIN & LEHR LLP
515 N. FLAGLER DRIVE, 6TH FLOOR
WEST PALM BEACH, FL 33401 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:	EFRON, MARILYN	
Address:	1005 DEL HARBOUR DRIVE	
City-St-Zip:	DELRAY BEACH, FL 33483	
Title:	MG	( ) Delete
Name:	EFRON, JASON B	
Address:	1005 DEL HARBOUR DR	
City-St-Zip:	DELRAY BEACH, FL 33483	
Title:	MG	( ) Delete
Name:	EFRON, JEREMY D	
Address:	1005 DEL HARBOUR DR	
City-St-Zip:	DELRAY BEACH, FL 33483	

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:	

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: MARILYN EFRON MGRM 04/13/2009

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