

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000111754

**FILED**  
**Feb 22, 2012**  
**Secretary of State**

**Entity Name:** UNIVERSITY CROSSINGS FIVE LLC

**Current Principal Place of Business:**

9 WASH HOLLOW ROAD  
UPPER BROOKVILLE, NY 11771

**New Principal Place of Business:**

**Current Mailing Address:**

2800 E. COMMERCIAL BLVD.  
209  
FORT LAUDERDALE, FL 33308

**New Mailing Address:**

6218 NORTH FEDERAL HIGHWAY  
FORT LAUDERDALE, FL 33308

**FEI Number:** 26-1642022

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NEG PROPERTY SERVICES  
2800 E. COMMERCIAL BLVD.  
SUITE 209  
FT. LAUDERDALE, FL 33308 US

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

NEG PROPERTY SERVICES  
6218 NORTH FEDERAL HIGHWAY  
FORT LAUDERDALE, FL 33308 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: NANCY GLUSMAN

02/22/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SABHARWAL, PAVIT  
Address: 9 WASH HOLLOW ROAD  
City-St-Zip: UPPER BROOKVILLE, NY 11771

Title: MGRM  
Name: SABHARWAL, SATNAM  
Address: 9 WASH HOLLOW ROAD  
City-St-Zip: UPPER BROOKVILLE, NY 11771

Title: MGRM  
Name: SABHARWAL, GUNIT  
Address: 9 WASH HOLLOW ROAD  
City-St-Zip: UPPER BROOKVILLE, NY 11771

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: NANCY GLUSMAN

AGT

02/22/2012

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