

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000017076

Entity Name: REGENCY MONTAUK, LLC

FILED  
Aug 31, 2009  
Secretary of State

## Current Principal Place of Business:

401 EAST LAS OLAS BLVD., STE. 1850  
FT. LAUDERDALE, FL 33301

## New Principal Place of Business:

1221 BRICKELL AVENUE  
SUITE 1600  
MIAMI, FL 33131

## Current Mailing Address:

401 EAST LAS OLAS BLVD., STE. 1850  
FT. LAUDERDALE, FL 33301

## New Mailing Address:

1221 BRICKELL AVENUE  
SUITE 1600  
MIAMI, FL 33131

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

ZELKOWITZ, STEVEN W  
% GRAYROBINSON, P.A.  
1221 BRICKELL AVENUE, STE. 1650  
MIAMI, FL 33131 US

## Name and Address of New Registered Agent:

ZELKOWITZ, STEVEN W  
% GRAYROBINSON, P.A.  
1221 BRICKELL AVENUE, STE. 1600  
MIAMI, FL 33131 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:

08/31/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MR. ( ) Change (X) Addition  
Name: FEELEY, THOMAS L  
Address: 500 FIRST STREET  
City-St-Zip: HOBOKEN, NJ 07030

Title: MR. ( ) Change (X) Addition  
Name: CEVA, DAVID W  
Address: 500 FIRST STREET  
City-St-Zip: HOBOKEN, NJ 07030

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: THOMAS FEELEY

MR.

08/31/2009

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