

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000018374

FILED
Apr 13, 2009
Secretary of State

Entity Name: UNITED RETAIL CENTERS, LLC

Current Principal Place of Business:

195 SOUTH WESTMONTE DRIVE
SUITE 1122
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

1039 HARLEY STRICKLAND BLVD
700
ORANGE CITY, FL 32763

Current Mailing Address:

195 SOUTH WESTMONTE DRIVE
SUITE 1122
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

1039 HARLEY STRICKLAND BLVD
700
ORANGE CITY, FL 32763

FEI Number: 26-2149746

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STRASBERG, LESLIE
195 SOUTH WESTMONTE DRIVE
SUITE 1122
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

STRASBERG, LESLIE
1039 HARLEY STRICKLAND BLVD
700
ORANGE CITY, FL 32763 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:

04/13/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: STRASBERG, LESLIE
Address: 195 SOUTH WESTMONTE DRIVE, SUITE 1122
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM () Delete
Name: STRASBERG, JAMES
Address: 195 SOUTH WESTMONTE DRIVE, SUITE 1122
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM () Delete
Name: CHAPPELL, ROBERT
Address: 195 SOUTH WESTMONTE DRIVE, SUITE 1122
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGRM () Delete
Name: CHAPPELL, MONIKA
Address: 195 SOUTH WESTMONTE DRIVE, SUITE 1122
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: STRASBERG, LESLIE
Address: 1039 HARLEY STRICKLAND BLVD, SUITE 700
City-St-Zip: ORANGE CITY, FL 32763

Title: MGRM (X) Change () Addition
Name: STRASBERG, JAMES
Address: 1039 HARLEY STRICKLAND BLVD, SUITE 700
City-St-Zip: ORANGE CITY, FL 32763

Title: MGRM (X) Change () Addition
Name: CHAPPELL, ROBERT
Address: 1039 HARLEY STRICKLAND BLVD, SUITE 700
City-St-Zip: ORANGE CITY, FL 32763

Title: MGRM (X) Change () Addition
Name: CHAPPELL, MONIKA
Address: 1039 HARLEY STRICKLAND BLVD, SUITE 700
City-St-Zip: ORANGE CITY, FL 32763

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: LESLIE STRASBERG

MGRM

04/13/2009

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