

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000018374

Entity Name: UNITED RETAIL CENTERS, LLC

FILED
Apr 29, 2011
Secretary of State

Current Principal Place of Business:

195 SOUTH WESTMONTE DRIVE
1122
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

195 SOUTH WESTMONTE DRIVE
1122
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

195 SOUTH WESTMONTE DRIVE
1122
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

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
1122
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

STRASBERG, JAMES
195 SOUTH WESTMONTE DRIVE
1122
ALTAMONTE SPRINGS, FL 32714 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: JAMES STRASBERG

04/29/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

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

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

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

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: JAMES STRASBERG

MGRM

04/29/2011

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