

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000023771

FILED
Apr 17, 2009
Secretary of State

Entity Name: SCW INVESTORS, L.L.C.

Current Principal Place of Business:

2740 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

2740 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020

New Mailing Address:

603 N. FLAMINGO RD., SUITE 250
ATTN: ARTHUR FISHMAN
PEMBROKE PINES, FL 33028

FEI Number: 26-2145198

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHASE, ALAN R
9400 S DADELAND BLVD STE 600
MIAMI, FL 33156 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: () Delete
Name:
Address:
City-St-Zip:

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

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

ADDITIONS/CHANGES:

Title: LP () Change (X) Addition
Name: FISHMAN, ARTHUR M
Address: 603 N. FLAMINGO ROAD, SUITE 250
City-St-Zip: PEMBROKE PINES, FL 33028

Title: LP () Change (X) Addition
Name: CARDONE, SCOTT
Address: 603 N. FLAMINGO ROAD, SUITE 250
City-St-Zip: PEMBROKE PINES, FL 33028

Title: LP () Change (X) Addition
Name: STELNICKI, ERIC
Address: 603 N. FLAMINGO ROAD, SUITE 250
City-St-Zip: PEMBROKE PINES, FL 33028

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: ARTHUR M. FISHMAN

LP

04/17/2009

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