

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000034368

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** COCHRAN MIAMI SHORES, LLC

**Current Principal Place of Business:**

1800 ELLER DRIVE, SUITE 222  
FT. LAUDERDALE, FL 33316

**New Principal Place of Business:**

**Current Mailing Address:**

1800 ELLER DRIVE, SUITE 222  
FT. LAUDERDALE, FL 33316

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

FITZGERALD PROPERTY MANAGEMENT  
1800 ELLER DRIVE, SUITE 222  
FT. LAUDERDALE, FL 33316 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:** MGRM  
**Name:** COCHRAN, JOHN B  
**Address:** 43 LOOKOUT POINT ROAD  
**City-St-Zip:** HULLS COVE, ME 04644

**Title:** MGRM  
**Name:** COCHRAN, SHELIA S TRUSTEE  
**Address:** 8205 KERRY ROAD  
**City-St-Zip:** CHEVY CHASE, MD 20815

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:** SHELIA COCHRAN

MGRM

03/21/2012

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