

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000039498

**FILED**  
**Jan 16, 2009**  
**Secretary of State**

**Entity Name:** REMWAY PORT SAINT LUCIE, LLC

**Current Principal Place of Business:**

525 NW LAKE WHITNEY PLACE SUITE 102  
PORT SAINT LUCIE, FL 34986

**New Principal Place of Business:**

**Current Mailing Address:**

525 NW LAKE WHITNEY PLACE SUITE 102  
PORT SAINT LUCIE, FL 34986

**New Mailing Address:**

FEI Number: 26-2478074

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MAHABIR-HORRERA, NICOLE  
10033 SW BROOKGREEN CIRCLE  
PORT ST. LUCIE, FL 34987 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 ( ) Delete  
Name: B.S.A.M. HOLDINGS, I, NC.  
Address: 10033 S.W. BROOKGREEN DRIVE  
City-St-Zip: PORT SAINT LUCIE, FL 34987

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: NICOLE MAHABIR-HERRERA

MGMR

01/16/2009

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