

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000069822

FILED
Jun 22, 2009
Secretary of State

Entity Name: PRP MANAGEMENT IV, LLC

Current Principal Place of Business:

1111 BRICKELL AVENUE, SUITE 2910
MIAMI, FL 33131

New Principal Place of Business:

1111 BRICKELL AVENUE
SUITE 2910
MIAMI, FL 33131

Current Mailing Address:

1111 BRICKELL AVENUE, SUITE 2910
MIAMI, FL 33131

New Mailing Address:

1111 BRICKELL AVENUE
SUITE 2910
MIAMI, FL 33131

FEI Number: 26-3082178 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HOUK, JANE A
STEARNS WEAVER MILLER WEISSLER ET AL
150 WEST FLAGLER STREET, SUITE 2200
MIAMI, FL 33130 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:

ADDITIONS/CHANGES:

Title: MR. () Change (X) Addition
Name: WEISS, ANDREW R COO
Address: 1111 BRICKELL AVE, SUITE 2910
City-St-Zip: MIAMI, FL 33131

Title: MR. () Change (X) Addition
Name: PARMENTER, DARRYL W CEO
Address: 1111 BRICKELL AVE, SUITE 2910
City-St-Zip: MIAMI, FL 33131

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: DARRYL W PARMENTER

CEO

06/22/2009

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