

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000110910

FILED
Jun 18, 2009
Secretary of State

Entity Name: SEASONS FLORIDA PROPERTY, LLC

Current Principal Place of Business:

8500 SW 8TH STREET SUITE 238
MIAMI, FL 33144

New Principal Place of Business:

Current Mailing Address:

8500 SW 8TH STREET SUITE 238
MIAMI, FL 33144

New Mailing Address:

FEI Number: 26-3867419 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

Name and Address of New Registered Agent:

MACHADO, ANTONIO L ESQ
8500 SW 8TH STREET SUITE 238
MIAMI, FL 33144 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TARA PROPERTY CAPITAL
Address: RICHMOND HOUSE ANNEX THE CENTRE COMPLEX
City-St-Zip: PROVIDENCIALES TURKS CAICOS,

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ORAL, EMRE
Address: C/O ANTONIO L MARTINEZ, 8500 SW 8 ST #238
City-St-Zip: MIAMI, FL 33144

Title: MGR () Change (X) Addition
Name: ORAL, NUSIN
Address: C/O ANTONIO L MARTINEZ, 8500 SW 8 ST #238
City-St-Zip: MIAMI, FL 33144

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: EMRE ORAL

MGR

06/18/2009

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