

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000112610

Entity Name: LAS PALMAS RENTALS LLC

FILED
Jun 25, 2009
Secretary of State

Current Principal Place of Business:

2031 PARK PLACE
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

2031 PARK PLACE
BOCA RATON, FL 33486

New Mailing Address:

FEI Number: FEI Number Applied For (X) 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:

HELLER, STEVEN C
12318 ANTILLE DRIVE
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

DICRESCENZO, ANGELA D
665 SE 10TH STREET
SUITE 201
DEERFIELD BEACH, FL 33441 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: ANGELA DICRESCENZO

06/25/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GRADY, LAURI M
Address: 2031 PARK PLACE
City-St-Zip: BOCA RATON, FL 33486

Title: MGR () Delete
Name: GRADY, JOSEPH P
Address: 2031 PARK PLACE
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GRADY, LAURI M
Address: 2031 PARK PLACE
City-St-Zip: BOCA RATON, FL 33486

Title: MGRM (X) Change () Addition
Name: GRADY, JOSEPH P
Address: 2031 PARK PLACE
City-St-Zip: BOCA RATON, FL 33486

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: LAURIE GRADY

MGRM

06/25/2009

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