

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000091425

Entity Name: CIRS MANAGEMENT LLC

FILED
Mar 04, 2011
Secretary of State

Current Principal Place of Business:

3003 TAMIAMI TRAIL NORTH
SUITE 400
NAPLES, FL 34103

New Principal Place of Business:

2550 GOODLETTE ROAD NORTH
SUITE 100
NAPLES, FL 34103

Current Mailing Address:

3495 PEACHTREE PKWY., STE. 114-218
SUWANEE, GA 30024

New Mailing Address:

FEI Number: 27-0986344

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORINA, ROBERT D
3003 TAMIAMI TRAIL NORTH
SUITE 400
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

CORINA, ROBERT D
2550 GOODLETTE ROAD NORTH
SUITE 100
NAPLES, FL 34103 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:

03/04/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: FLOOD, THOMAS J
Address: 2550 GOODLETTE ROAD NORTH, SUITE 100
City-St-Zip: NAPLES, FL 34103

Title: P
Name: FLOOD, THOMAS J
Address: 2550 GOODLETTE ROAD NORTH, SUITE 100
City-St-Zip: NAPLES, FL 34103

Title: VP
Name: CORINA, ROBERT D
Address: 2550 GOODLETTE ROAD NORTH, SUITE 100
City-St-Zip: NAPLES, FL 34103

Title: VPTS
Name: O'CONNOR, JOHN D
Address: 3495 PEACHTREE PKWY, STE 114-218
City-St-Zip: SUWANEE, GA 30024

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: THOMAS J. FLOOD

MGR

03/04/2011

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