

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000109073

FILED
May 01, 2010
Secretary of State

Entity Name: SOUTHEAST FLORIDA REGIONAL CENTER, LLC

Current Principal Place of Business:

55 MIRACLE MILE, SUITE 300
CORAL GABLES, FL 33134

New Principal Place of Business:

1825 PONCE DE LEON BLVD., #431
CORAL GABLES, FL 33134

Current Mailing Address:

55 MIRACLE MILE, SUITE 300
CORAL GABLES, FL 33134

New Mailing Address:

1825 PONCE DE LEON BLVD., #431
CORAL GABLES, FL 33134

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:

WOOD, RICHARD A ESQ.
1395 BRICKELL AVENUE, 14TH FLOOR
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

DAVIS, JIM
1825 PONCE DE LEON BLVD., #431Q
CORAL GABLES, FL 33134 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: JIM DAVIS

05/01/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: HOLLY, WILLIAM H
Address: 1825 PONCE DE LEON BLVD., #431
City-St-Zip: CORAL GABLES, FL 33134

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: WILLIAM H. HOLLY

MGRM

05/01/2010

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