

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000121296

Entity Name: CLR LINCOLN ASSOCIATES, LLC

**FILED**  
**Jan 26, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

265 POST ROAD WEST  
C/O RAND REAL ESTATE SERVICES, INC.  
WESTPORT, CT 068804702

## **New Principal Place of Business:**

265 POST ROAD WEST  
C/O RAND REAL ESTATE SERVICES, INC.  
WESTPORT, CT 068804702 US

## **Current Mailing Address:**

265 POST ROAD WEST  
C/O RAND REAL ESTATE SERVICES, INC.  
WESTPORT, CT 068804702

## **New Mailing Address:**

FEI Number: 27-1664708

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

BLUM, SAMUEL SPENCER ESQUIRE  
2666 TIGERTAIL AVENUE, SUITE 106  
COCONUT GROVE, FL 33133 US

## **Name and Address of New Registered Agent:**

BLUM, SAMUEL SPENCER ESQUIRE  
2666 TIGERTAIL AVENUE  
SUITE 106  
COCONUT GROVE, FL 33133 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

01/26/2012

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MR  
Name: RANDEL, JAMES A  
Address: 265 POST ROAD WEST  
City-St-Zip: WESTPORT, CT 068804702

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: JEANNETTE ZOLAN

MGR

01/26/2012

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