

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000000066

**FILED**  
**Mar 30, 2011**  
**Secretary of State**

**Entity Name:** TOBIN PROPERTIES HOLDINGS, LLC

**Current Principal Place of Business:**

1101 HILLCREST DRIVE  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

**Current Mailing Address:**

1101 HILLCREST DRIVE  
HOLLYWOOD, FL 33021

**New Mailing Address:**

**FEI Number:** 27-1844552

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TOBIN, HERBERT A  
1101 HILLCREST DRIVE  
HOLLYWOOD, FL 33021 US

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

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:** CEO  
**Name:** TOBIN, HERBERT A  
**Address:** 1101 BEN TOBIN DRIVE  
**City-St-Zip:** HOLLYWOOD, FL 33021 US

**Title:** EVP  
**Name:** TOBIN, JASON L  
**Address:** 1101 BEN TOBIN DRIVE  
**City-St-Zip:** HOLLYWOOD, FL 33021

**Title:** COO  
**Name:** FALCONI, NATASHA  
**Address:** 1101 BEN TOBIN DRIVE  
**City-St-Zip:** HOLLYWOOD, FL 33021

**Title:** VP  
**Name:** LOPEZ, VICTOR M JR  
**Address:** 1101 BEN TOBIN DRIVE  
**City-St-Zip:** HOLLYWOOD, FL 33021

**Title:** S  
**Name:** DAMIAN, VINCENT E  
**Address:** 1101 BEN TOBIN DRIVE  
**City-St-Zip:** HOLLYWOOD, FL 33021

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:** VICTOR M. LOPEZ, JR

VP

03/30/2011

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