

2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

**FILED
Oct 03, 2011
Secretary of State**

DOCUMENT# L10000125530

Entity Name: MAGNOLIA NORTH 2145 APARTMENTS, LLC

Current Principal Place of Business:

490 OPA-LOCKA BOULEVARD
SUITE 20
OPA-LOCKA, FL 33054 US

New Principal Place of Business:

Current Mailing Address:

490 OPA-LOCKA BOULEVARD
SUITE 20
OPA-LOCKA, FL 33054 US

New Mailing Address:

FEI Number: 27-2469105 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAMS-BALDWIN, STEPHANIE
490 OPA-LOCKA BOULEVARD
20
OPA-LOCKA, FL 33054 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: MGRM
Name: OPA-LOCKA COMMUNITY DEVELOPMENT CORP.
Address: 490 OPA-LOCKA, SUITE 20
City-St-Zip: OPA-LOCKA, FL 33054

Title: MGRM
Name: LOGAN, WILLIE
Address: 490 OPA LOCKA BOULEVARD
City-St-Zip: OPA-LOCKA, FL 33054

Title: VP
Name: WILLIAMS-BALDWIN, STEPHANIE
Address: 490 OPA LOCKA BOULEVARD
City-St-Zip: OPA-LOCKA, FL 33054

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: STEPHANIE WILLIAMS-BALDWIN VP 10/03/2011

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