

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000007269

Entity Name: SOUTHEAST CENTERS, L.L.C.

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1541 SUNSET DRIVE, SUITE 300  
CORAL GABLES, FL 33143

**New Principal Place of Business:**

**Current Mailing Address:**

1541 SUNSET DRIVE, SUITE 300  
CORAL GABLES, FL 33143

**New Mailing Address:**

FEI Number: 59-1859117

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HIGIER, GERALD M  
1541 SUNSET DRIVE SUITE 300  
CORAL GABLES, FL 33143 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: MGR  
Name: HIGIER, GERALD M  
Address: 1541 SUNSET DRIVE, STE. 300  
City-St-Zip: CORAL GABLES, FL 33143

Title: MGR  
Name: SCOTT, JEFFREY  
Address: 1541 SUNSET DRIVE STE. 300  
City-St-Zip: CORAL GABLES, FL 33143

Title: MGR  
Name: LEVINE, TODD  
Address: 1541 SUNSET DRIVE STE. 300  
City-St-Zip: CORAL GABLES, FL 33143

Title: MGR  
Name: BOUCHER, MARC  
Address: 1541 SUNSET DRIVE STE. 300  
City-St-Zip: CORAL GABLES, FL 33143

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: GERALD M HIGIER

MGR

04/11/2012

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