2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 23, 2008
Secretary of State

DOCUMENT# M00000000807

Entity Name: ELSTON/LEETSDALE, LLC

Current Principal Place of Business:

801 ARTHUR GODFREY ROAD
SUITE 600
MIAMI BEACH, FL 33140

New Principal Place of Business:

Current Mailing Address:

801 ARTHUR GODFREY ROAD
SUITE 600
MIAMI BEACH, FL 33140

New Mailing Address:

FEI Number: 36-4310530 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEVENDORF, DANA
801 ARTHUR GODFREY ROAD STE 600
MIAMI BEACH, FL 33131 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	( ) Delete
Name:	PALM/JOHNSON MANAGER, , INC.	
Address:	801 ARTHUR GODFREY ROAD, STE 600	
City-St-Zip:	MIAMI BEACH, FL 33140	
Title:	MGR	( ) Delete
Name:	BITTEL, STEPHEN H	
Address:	801 ARTHUR GODFREY ROAD, STE 600	
City-St-Zip:	MIAMI BEACH, FL 33140	
Title:	S	( ) Delete
Name:	DEVENDORF, DANA	
Address:	801 ARTHUR GODFREY RD; STE 600	
City-St-Zip:	MIAMI BEACH, FL 33140	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DANA DEVENDORF RA 01/23/2008

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