

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001609

Entity Name: DONPARK ASSOCIATES, LLC

FILED
Apr 13, 2009
Secretary of State

Current Principal Place of Business:

C/O MICHAEL GREENBERG
15 CHARLES STREET, SUITE 15A
NEW YORK, NY 10014

New Principal Place of Business:

Current Mailing Address:

C/O MICHAEL GREENBERG
15 CHARLES STREET, SUITE 15A
NEW YORK, NY 10014

New Mailing Address:

FEI Number: 56-2416860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREENBERG, HAROLD
17595 BOCAIRE PLACE
BOCA RATON, FL 33487 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 () Delete
Name: GREENBERG, MICHAEL
Address: 15 CHARLES STREET
City-St-Zip: NEW YORK, NY 10014

Title: MGRM () Delete
Name: GREENBERG, JONATHAN
Address: 15 CHARLES STREET
City-St-Zip: NEW YORK, NY 10014

Title: MGRM () Delete
Name: GREENBERG, SHARON
Address: 627 S. BOWMAN AVE
City-St-Zip: MERION STA, PA 19066

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: MICHAEL GREENBERG

MR.

04/13/2009

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