

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003210

FILED  
Feb 16, 2010  
Secretary of State

Entity Name: MCZ/CENTRUM OCEANCREST, L.L.C.

**Current Principal Place of Business:**

225 WEST HUBBARD STREET, 4TH FLOOR  
CHICAGO, IL 60654

**New Principal Place of Business:**

**Current Mailing Address:**

225 WEST HUBBARD STREET, 4TH FLOOR  
CHICAGO, IL 60654

**New Mailing Address:**

FEI Number: 20-1423388

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: SLAVEN, ARTHUR  
Address: 225 WEST HUBBARD STREET, 4TH FLOOR  
City-St-Zip: CHICAGO, IL 60654

Title: MGR  
Name: LERNER, MICHAEL  
Address: 1555 NORTH SHEFFIELD AVENUE  
City-St-Zip: CHICAGO, IL 60642

Title: MGR  
Name: NIVEN, BRIAN  
Address: 1555 NORTH SHEFFIELD AVENUE  
City-St-Zip: CHICAGO, IL 60642

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: ARTHUR SLAVEN

MGR

02/16/2010

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