

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000006275

**Entity Name:** CLF JCI FLORIDA LLC

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1065 AVENUE OF THE AMERICAS  
NEW YORK, NY 10018

**New Principal Place of Business:**

**Current Mailing Address:**

1065 AVENUE OF THE AMERICAS  
NEW YORK, NY 10018

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CAPLEASE LP  
Address: 1065 AVENUE OF THE AMERICAS  
City-St-Zip: NEW YORK, NY 10018

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: JOHN WARCH

SVP

01/05/2011

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