

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006931

FILED
Apr 29, 2009
Secretary of State

Entity Name: DOWNTOWN SEMINOLE, LLC

Current Principal Place of Business:

C/O AEGIS PARTNERS, LLC
801 WEST BAY DRIVE, SUITE 406
LARGO, FL 33770

New Principal Place of Business:

Current Mailing Address:

C/O AEGIS PARTNERS, LLC
801 WEST BAY DRIVE, SUITE 406
LARGO, FL 33770

New Mailing Address:

FEI Number: 20-8030076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NELSON, LEE E ESQ.
C/O SHUTTS & BOWEN LLP
100 SOUTH ASHLEY DRIVE, STE 1500
TAMPA, FL 33602 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: AEGIS PARTNERS, LLC
Address: 801 WEST BAY DRIVE, SUITE 406
City-St-Zip: LARGO, FL 33770

Title: MGRM () Delete
Name: COMMERCIAL REALTY MANAGER IIA (REIT), INC.
Address: 200 WITMER ROAD
City-St-Zip: HORSHAM, PA 190448015

Title: MGRM () Delete
Name: GIBBS, JAMES M
Address: 801 WEST BAY DRIVE, SUITE 406
City-St-Zip: LARGO, FL 33770

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: JAMES M GIBBS

MGRM

04/29/2009

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