

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000001379

FILED
Apr 10, 2009
Secretary of State

Entity Name: MITA RESIDENTIAL PROPERTY SERVICES, LLC

Current Principal Place of Business:

C/O AFTC
300 STAMFORD PLACE, SUITE 315
STAMFORD, CT 06902

New Principal Place of Business:

Current Mailing Address:

C/O AFTC
300 STAMFORD PLACE, SUITE 315
STAMFORD, CT 06902

New Mailing Address:

FEI Number: 20-5958463

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

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: P () Delete
Name: ZIFF, T. ANN
Address: 350 PARK AVE 11TH FLR
City-St-Zip: NEW YORK, NY 10022

Title: VT () Delete
Name: ENGEL, KELLY
Address: 350 PARK AVE 11TH FLR
City-St-Zip: NEW YORK, NY 10022

Title: VS () Delete
Name: GRAY, DAVID
Address: 350 PARK AVE 11TH FLR
City-St-Zip: NEW YORK, NY 10022

Title: V () Delete
Name: STAFFORD, PAUL
Address: 350 PARK AVE 11TH FLR
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: ZIFF, ANN T
Address: 300 FIRST STAMFORD PLACE, SUITE 315
City-St-Zip: STAMFORD, CT 06902

Title: VT (X) Change () Addition
Name: ENGEL, KELLY
Address: 300 FIRST STAMFORD PLACE, SUITE 315
City-St-Zip: STAMFORD, CT 06902

Title: VS (X) Change () Addition
Name: GRAY, DAVID
Address: 300 FIRST STAMFORD PLACE, SUITE 315
City-St-Zip: STAMFORD, CT 06902

Title: V (X) Change () Addition
Name: STAFFORD, PAUL
Address: 300 FIRST STAMFORD PLACE, SUITE 315
City-St-Zip: STAMFORD, CT 06902

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: KELLY ENGEL

VP

04/10/2009

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