

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M07000001430

**FILED**  
**Mar 16, 2011**  
**Secretary of State**

**Entity Name:** PRP MEZZ 1, LLC

**Current Principal Place of Business:**

2202 N. WEST SHORE BOULEVARD, SUITE 470B  
LEGAL DEPT  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

2202 N. WEST SHORE BOULEVARD, SUITE 470B  
LEGAL DEPT  
TAMPA, FL 33607

**New Mailing Address:**

**FEI Number:** 20-8518004

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KADOW, JOSEPH J  
2202 N. WEST SHORE BOULEVARD, SUITE 470B  
LEGAL DEPT  
TAMPA, FL 33607 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:** PRP MEZZ 2, LLC  
**Address:** 2202 N. WEST SHORE BOULEVARD, SUITE 470B  
**City-St-Zip:** TAMPA, FL 33607

**Title:** MGR  
**Name:** MARTONE, PHILIP A  
**Address:** 48 WALL STREET  
**City-St-Zip:** NEW YORK, NY 10005

**Title:** MGR  
**Name:** FIORAVANTI, ALBERT J  
**Address:** 48 WALL STREET  
**City-St-Zip:** NEW YORK, NY 10005

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:** JOSEPH J. KADOW

VP

03/16/2011

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