

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000002792

Entity Name: FLAGLERCE HOLDINGS, LLC

FILED  
Apr 22, 2009  
Secretary of State

## Current Principal Place of Business:

4700 MILLENIA BLVD., SUITE 500  
ORLANDO, FL 32839

## New Principal Place of Business:

## Current Mailing Address:

4700 MILLENIA BLVD., SUITE 500  
ORLANDO, FL 32839

## New Mailing Address:

FEI Number: 61-1559021

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 ( ) Delete  
Name: HOLMES, THOMAS R  
Address: 444 GULF OF MEXICO DRIVE, SUITE 201  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: MGR ( ) Delete  
Name: LEV, BRUCE L  
Address: 736 TITICUS ROAD  
City-St-Zip: NORTH SALEM, NY 10560

Title: MGR ( ) Delete  
Name: MCDONELL, MARK A  
Address: 923 S. GOLFVIEW STREET  
City-St-Zip: TAMPA, FL 33629

Title: MGR ( ) Delete  
Name: JOHNSON, MICHELLE H  
Address: 3521 VISTA COURT  
City-St-Zip: MIAMI, FL 33133

Title: MGR (X) Delete  
Name: WILMOT, CHRISTOPHER  
Address: 1710 ALAMEDA AVENUE  
City-St-Zip: ORLANDO, FL 32804

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: HOLMES, THOMAS R  
Address: 444 GULF OF MEXICO DRIVE, SUITE 201  
City-St-Zip: LONGBOAT KEY, FL 34228

Title: MGRM (X) Change ( ) Addition  
Name: LEV, BRUCE L  
Address: 736 TITICUS ROAD  
City-St-Zip: NORTH SALEM, NY 10560

Title: MGRM (X) Change ( ) Addition  
Name: MCDONELL, MARK A  
Address: 923 S. GOLFVIEW STREET  
City-St-Zip: TAMPA, FL 33629

Title: MGRM (X) Change ( ) Addition  
Name: JOHNSON, MICHELLE H  
Address: 3521 VISTA COURT  
City-St-Zip: MIAMI, FL 33133

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: MARK A MCDONELL

PRES

04/22/2009

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