

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M08000004533

FILED
May 11, 2009
Secretary of State**Entity Name:** FDG FLAGLER STATION 1300 LLC**Current Principal Place of Business:**2855 LEJEUNE RD 4TH FLOOR
CORAL GABLES, FL 33134**New Principal Place of Business:****Current Mailing Address:**2855 LEJEUNE RD., 4TH FLOOR
CORAL GABLES, FL 33134**New Mailing Address:****FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**COBB, KOLLEEN O.P.
2855 LEJEUNE RD., 4TH FLOOR
CORAL GABLES, FL 33134 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: FDG FLAGLER STATION I LLC
Address: 2855 LEJEUNE RD., 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: P () Delete
Name: HEVIA, JOSE
Address: 2855 LEJEUNE RD 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: VPS () Delete
Name: COBB, KOLLEEN
Address: 2855 LEJEUNE RD 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: VPT () Delete
Name: ABAUNZA, CARLOS
Address: 2855 LEJEUNE RD 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: VP () Delete
Name: SWANSON, ERIC
Address: 2855 LEJEUNE RD 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: VP () Delete
Name: TICKELL, KEITH
Address: 10151 DEERWOOD PARK BLVD BLDG 100 # 330
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FDG FLAGLER STATION III LLC
Address: 2855 LEJEUNE RD., 4TH FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KOLLEEN COBB

VPS

05/11/2009

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