

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000000531

**FILED**  
**Apr 13, 2012**  
**Secretary of State**

**Entity Name:** SLV AMHURST OAKS, L.L.C.

**Current Principal Place of Business:**

201 NORTH FRANKLIN STREET, SUITE 2200  
TAMPA, FL 33602

**New Principal Place of Business:**

591 W PUTNAM AVE  
GREENWICH, CT 06830 US

**Current Mailing Address:**

201 NORTH FRANKLIN STREET, SUITE 2200  
TAMPA, FL 33602

**New Mailing Address:**

591 W PUTNAM AVE  
GREENWICH, CT 06830 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

KUSSNER, STEPHEN  
201 NORTH FRANKLIN STREET, SUITE 2200  
C/O GRAY ROBINSON, P.A.  
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  
Name: SLV-FLA1, L.L.C.  
Address: 591 W PUTNAM AVE  
City-St-Zip: GREENWICH, CT 06830

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: KELLY LETTMANN

POA

04/13/2012

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