

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000002284

**FILED**  
**Feb 02, 2011**  
**Secretary of State**

**Entity Name:** 500 SHADOW LAKES BLVD HOLDINGS, LLC

**Current Principal Place of Business:**

7 ST. PAUL STREET, SUITE 1660  
BALTIMORE, MD 21202

**New Principal Place of Business:**

7501 WISCONSIN AVENUE  
SUITE 500 WEST  
BETHESDA, MD 20814

**Current Mailing Address:**

7 ST. PAUL STREET, SUITE 1660  
BALTIMORE, MD 21202

**New Mailing Address:**

7501 WISCONSIN AVENUE  
SUITE 500 WEST  
BETHESDA, MD 20814

**FEI Number:** 04-3628117

**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  
**Name:** CW CAPITAL ASSET MANAGEMENT, LLC  
**Address:** 7501 WISCONSIN AVENUE SUITE 500 WEST  
**City-St-Zip:** BETHESDA, MD 20814

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: MICHAEL GREENBLATT

SVP

02/02/2011

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