## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000051415

Name:

Address:

City-St-Zip:

MONDRE, RICHARD D

PLANTATION, FL 33324

1200 S. PINE ISLAND RD., SUITE 200

Entity Name: PRESIDENTIAL SUITES INVESTMENTS-LIGP INC.

FILED Feb 06, 2009 Secretary of State

Entity Name: FRESIDENTIAL SOTTES INVESTIMENTS-LGF, INC.					
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
SUITE 400	91ST STREE A, FL 33180	Т			
Current Ma	ailing Addre	ess:	New Mailing Address	New Mailing Address:	
SUITE 400	91ST STREE A, FL 33180	Т			
FEI Number:	65-1028874	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
GORDON, MARK J 2875 NE 191ST ST. STE. 400 AVENTURA, FL 33180 US			PAPADAKIS, JOAN 2875 NE 191ST ST. STE. 400 AVENTURA, FL 3318	2875 NE 191ST ST.	
The above in the State		submits this statement for the pu	urpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: JOAN PAPADAKIS				02/06/2009	
Electronic Signature of Registered Agent			nt	Date	
Election Carr	ıpaign Financi	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GORDON, MA	ST ST., STE. 400	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	EPSTEIN, DA	ISLAND RD., SUITE 200	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	D (	) Delete	Title:	( ) Change ( ) Addition	

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: MARK J. GORDON D 02/06/2009