

**2014 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L02000003622

**FILED  
Feb 11, 2014  
Secretary of State  
CC4769372981**

**Entity Name:** CORNERSTONE RESIDENTIAL MANAGEMENT, L.L.C.

**Current Principal Place of Business:**

2100 HOLLYWOOD BOULEVARD  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

2100 HOLLYWOOD BOULEVARD  
HOLLYWOOD, FL 33020

**FEI Number: 75-2998533**

**Certificate of Status Desired: No**

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

WOLFE, LEON J  
2100 HOLLYWOOD BOULEVARD  
HOLLYWOOD, FL 33020 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name JL HOLDING CORP.  
Address 2100 HOLLYWOOD BOULEVARD  
City-State-Zip: HOLLYWOOD FL 33020

Title MGRM  
Name STUART I. MEYERS FAMILY PARTNERSHIP, LTD.  
Address 2100 HOLLYWOOD BOULEVARD  
City-State-Zip: HOLLYWOOD FL 33020

Title MGRM  
Name M3, INC.  
Address 2100 HOLLYWOOD BOULEVARD  
City-State-Zip: HOLLYWOOD FL 33020

Title MGRM  
Name MSM, INC.  
Address 2100 HOLLYWOOD BOULEVARD  
City-State-Zip: HOLLYWOOD FL 33020

Title TREASURER  
Name ADAMS, BRUCE  
Address 2100 HOLLYWOOD BOULEVARD  
City-State-Zip: HOLLYWOOD FL 33020

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JORGE LOPEZ**

**MGRM**

**02/11/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date