

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000106830

Entity Name: PINECREST PLACE LLC

Current Principal Place of Business:

TWO ALHAMBRA PLAZA, SUITE 1280
CORAL GABLES, FL 33134

Current Mailing Address:

301 E. 4TH ST, 15TH FLOOR
CINCINNATI, OH 45202

FEI Number: 27-2226948

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EAGAN, THOMAS VESQ.
200 SOUTH BISCAYNE BLVD., SUITE 4100
MIAMI, FL 33131 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 MGR
Name FULLER, VICTOR L
Address TWO ALHAMBRA PLAZA, SUITE 1280
City-State-Zip: CORAL GABLES FL 33134

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: VICTOR L. FULLER

MGR

03/25/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date