## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021492

Entity Name: 111 NORTH M, L.L.C.

FILED Jan 25, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1050 S. FEDERAL HWY., STE. 149 111 NORTH M STREET DELRAY BEACH, FL 33483

LAKE WORTH, FL 33460

**Current Mailing Address: New Mailing Address:** 

1050 S. FEDERAL HWY., STE. 149 111 NORTH M STREET DELRAY BEACH, FL 33483

LAKE WORTH, FL 33460

FEI Number: 76-0715500 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LIONS, JACOB LIONS, JACOB 1050 S. FEDERAL HWY., STE. 149 111 NORTH M STREET

DELRAY BEACH, FL 33483 #4 LAKE WORTH, FL 33460 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: JACOB LIONS 01/25/2005

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

MGRM Title: MGRM (X) Change ( ) Addition () Delete

LIONS, JACOB LIONS, JACOB Name: Name: Address: 1050 S. FEDERAL HWY., STE. 149 Address: 111 NORTH M STREET STE 4

City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: LAKE WORTH, FL 33460

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: JACOB LIONS 01/25/2005