

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000001674

Entity Name: NEW HARBOR LOFTS, LLC

FILED  
Apr 28, 2007  
Secretary of State

**Current Principal Place of Business:**

2125 N COMMERCE PKWY  
WESTON, FL 33326

**New Principal Place of Business:**

2101 N COMMERCE PKWY  
WESTON, FL 33326

**Current Mailing Address:**

2125 N COMMERCE PKWY  
WESTON, FL 33326

**New Mailing Address:**

2101 N COMMERCE PKWY  
WESTON, FL 33326

FEI Number: 41-2121711

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AED SERVICES, INC.  
2125 N COMMERCE PKWY  
WESTON, FL 33326 US

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

AED SERVICES, INC.  
2101 N COMMERCE PKWY  
WESTON, FL 33326 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: JAMES B PAINE

04/28/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: AED SERVICES, INC.,  
Address: 2125 N. COMMERCE PARKWAY  
City-St-Zip: WESTON, FL 33326

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: AED SERVICES, INC.,  
Address: 2101 N. COMMERCE PARKWAY  
City-St-Zip: WESTON, FL 33326

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 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: JAMES B PAINE

MGR

04/28/2007

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