

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Mar 25, 2008 08:00 AM  
Secretary of State

DOCUMENT # L04000012732

1. Entity Name  
1442 S.E. 4TH, L.L.C.



Principal Place of Business  
399 WEST PALMETTO PARK RD  
SUITE 200  
BOCA RATON, FL 33432

Mailing Address  
399 WEST PALMETTO PARK RD  
SUITE 200  
BOCA RATON, FL 33432



03112008No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

01-0806676

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

KENNEDY, BEN S JR.,ESQ  
399 WEST PALMETTO PARK ROAD  
SUITE 200  
BOCA RATON, FL 33432

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

U000000869798  
04/09/08-80064-010 138.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KENNEDY, BEN S JR. 399 W.PALMETTO PK RD SUITE 200 BOCA RATON, FL 33432
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: \_\_\_\_\_

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

3/11/08 5617508535