

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084798

FILED  
Apr 26, 2007  
Secretary of State

**Entity Name:** SOUTH FLORIDA FORUM ASSOCIATES, LLC

**Current Principal Place of Business:**

104 CRANDON BLVD.  
SUITE # 414  
KEY BISCAYNE, FL 33149 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 49-1527  
KEY BISCAYNE, FL 33149 US

**New Mailing Address:**

FEI Number: 20-1930293

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MEYER, WILLIAM A  
1601 BELVEDERE ROAD  
SUITE 407  
WEST PALM BEACH, FL 33406 US

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

KARDONSKI, FRANK  
104 CRANDON BLVD.  
SUITE 414  
KEY BISCAYNE, FL 33149 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: FRANK KARDONSKI

04/26/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: MEYER, WILLIAM A  
Address: 1601 BELVEDERE ROAD # 407  
City-St-Zip: WEST PALM BEACH, FL 33406 US

Title: MGRM ( ) Delete  
Name: KARDONSKI, FRANK  
Address: 104 CRANDON BLVD. # 414  
City-St-Zip: KEY BISCAYNE, FL 33149 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: FRANK KARDONSKI

MGRM

04/26/2007

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