

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000103139

FILED
Apr 07, 2009
Secretary of State

Entity Name: 1075 N.W. BROKEN SOUND PARKWAY, LLC

Current Principal Place of Business:

1075 BROKEN SOUND PARKWAY NW, SUITE 100
ATTN: JOHN SLAVIC
BOCA RATON, FL 33487 US

New Principal Place of Business:

Current Mailing Address:

1075 BROKEN SOUND PARKWAY NW, SUITE 100
ATTN: JOHN SLAVIC
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 20-3654001 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLAVIC, JOHN J
1075 BROKEN SOUND PARKWAY NW
SUITE 100
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SLAVIC, JOHN J
Address: 1075 BROKEN SOUND PARKWAY NW, SUITE 100
City-St-Zip: BOCA RATON, FL 33487 US

Title: MGRM () Delete
Name: SANDLER, MICHAEL A
Address: 1075 BROKEN SOUND PARKWAY NW, SUITE 100
City-St-Zip: BOCA RATON, FL 33487 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: JOHN J SLAVIC

MGRM

04/07/2009

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