

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000017768

Entity Name: 208 GOVERNOR'S LLC

FILED  
Jan 16, 2008  
Secretary of State

**Current Principal Place of Business:**

2799 NW BOCA RATON BLVD., SUITE 203  
C/O STEVEN A. SCIARRETTA  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

2799 NW BOCA RATON BLVD., SUITE 203  
C/O STEVEN A. SCIARRETTA  
BOCA RATON, FL 33431

**New Mailing Address:**

FEI Number: 20-4261776

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCIARRETTA, STEVEN A  
2799 NW BOCA RATON BLVD., SUITE 203  
BOCA RATON, FL 33431 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: MGR ( ) Delete  
Name: SCIARRETTA, STEVEN A  
Address: 2799 NW BOCA RATON BLVD., SUITE 203  
City-St-Zip: BOCA RATON, FL 33431

**ADDITIONS/CHANGES:**

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: STEVEN SCIARRETTA

MGR

01/16/2008

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