

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000104457

FILED
Apr 21, 2009
Secretary of State

Entity Name: 3900 CORAL RIDGE DRIVE ASSOCIATES, LLC

Current Principal Place of Business:

100 N. VILLAGE AVENUE
SUITE 37
ROCKVILLE CENTER, NY 11570 US

New Principal Place of Business:

Current Mailing Address:

100 N. VILLAGE AVENUE
SUITE 37
ROCKVILLE CENTER, NY 11570 US

New Mailing Address:

FEI Number: 20-5802785 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CLIFFORD I. HERTZ, P.A.
ONE NO. CLEMATIS STREET
SUITE 500
WEST PALM BEACH, FL 33401 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: LEFFLER, STEVE
Address: 100 N. VILLAGE AVENUE, SUITE 37
City-St-Zip: ROCKVILLE CENTER, NY 11570 US

Title: MGRM () Delete
Name: ZUCKERBROT, SANFORD
Address: 35-11 35TH AVENUE
City-St-Zip: LONG ISLAND CITY, NY 11106 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: SRTEVEN LEFFLER

MGR.

04/21/2009

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