

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000060776

FILED  
Apr 23, 2008  
Secretary of State

Entity Name: REM PARTNERS, LLC

**Current Principal Place of Business:**

1200 HARRISON STREET  
HOLLYWOOD, FL 33019 US

**New Principal Place of Business:**

**Current Mailing Address:**

1200 HARRISON STREET  
HOLLYWOOD, FL 33019 US

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

WEINBERG, STEVEN A  
7805 SW 6 COURT  
PLANTATION, FL 33319 US

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

WEINBERG, STEVEN A  
7805 SW 6 COURT  
PLANTATION, FL 33324 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: \_\_\_\_\_ 04/23/2008  
Electronic Signature of Registered Agent                      Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HIBBS, GREGORY J  
Address: 1200 HARRISON STREET  
City-St-Zip: HOLLYWOOD, FL 33019 US

**ADDITIONS/CHANGES:**

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

Title: MGRM ( ) Delete  
Name: HIBBS, NANCY C  
Address: 1200 HARRISON STREET  
City-St-Zip: HOLLYWOOD, FL 33019 US

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: GREGORY J. HIBBS                      MGRM                      04/23/2008  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date