

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000104936

FILED
Mar 19, 2009
Secretary of State

Entity Name: SOUTHPOINT ASSOCIATES, LLC

Current Principal Place of Business:

C/O NASON, YEAGER, GERSON, WHITE & LIOCE
1645 PALM BEACH LAKES BLVD, SUITE 1200
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

C/O NASON, YEAGER, GERSON, WHITE & LIOCE
1645 PALM BEACH LAKES BLVD, SUITE 1200
WEST PALM BEACH, FL 33401

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:

ARMOUR, ALAN I ESQ.
C/O NASON, YEAGER, GERSON, WHITE & LIOCE
1645 PALM BEACH LAKES BLVD., SUITE 1200
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: ERENBERG, RICHARD
Address: 701 TECHNOLOGY DRIVE, SUITE 210
City-St-Zip: CANONSBURG, PA 15317

ADDITIONS/CHANGES:

Title: TTEE (X) Change () Addition
Name: KALB, WILLIAM LTDAUTH
Address: 1645 PALM BEACH LAKES BLVD., SUITE1200
City-St-Zip: WEST PALM BEACH, FL 33401

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: WILLIAM KALB

TTEE

03/19/2009

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