

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000033122

Entity Name: ALLODIUM IV, LC

FILED  
Jan 31, 2007  
Secretary of State

**Current Principal Place of Business:**

C/O 1801 N. MILITARY TRAIL, STE. 200  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

C/O 1801 N. MILITARY TRAIL, STE. 200  
BOCA RATON, FL 33431

**New Mailing Address:**

FEI Number: 03-0558288

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HRAWG CORP.  
1801 N. MILITARY TRAIL, STE. 200  
BOCA RATON, FL 33431 US

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

KIRSCHNER, MITCHELL B  
1801 N. MILITARY TRAIL, STE. 200  
BOCA RATON, FL 33431 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: MITCHELL B. KIRSCHNER

01/31/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KIRSCHNER, MITCHELL B  
Address: 1801 N. MILITARY TRAIL, SUITE 200  
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM ( ) Delete  
Name: SUSSMAN, JEFF  
Address: 1499 W. PALMETTO PARK ROAD, #314  
City-St-Zip: BOCA RATON, FL 33431

**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 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: MITCHELL B. KIRSCHNER

MGRM

01/31/2007

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