

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000062685

FILED  
Feb 21, 2007  
Secretary of State

Entity Name: AMA LIMITED CO.

**Current Principal Place of Business:**

1625 HENDRY STREET  
THIRD FLOOR  
FORT MYERS, FL 33901

**New Principal Place of Business:**

1415 PANTHER LANE  
SUITE 246  
NAPLES, FL 34109

**Current Mailing Address:**

1625 HENDRY STREET  
THIRD FLOOR  
FORT MYERS, FL 33901

**New Mailing Address:**

1415 PANTHER LANE  
SUITE 246  
NAPLES, FL 34109

FEI Number: 72-1618381

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

EIHAUSEN, DERRICK  
1625 HENDRY STREET  
THIRD FLOOR  
FORT MYERS, FL 33901 US

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

NOVATT, JEFF M ESQ.  
821 FIFTH AVENUE SOUTH  
SUITE 201  
NAPLES, FL 34102 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: JEFF M. NOVATT, ESQ.

02/21/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ALICE, MEIR  
Address: 1625 HENDRY STREET #301  
City-St-Zip: FORT MYERS, FL 33901

Title: MGRM ( ) Delete  
Name: ALIAS, AVIEL  
Address: 1625 HENDRY STREET #301  
City-St-Zip: FORT MYERS, FL 33901

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ALICE, MEIR  
Address: 1415 PANTHER LANE, SUITE 246  
City-St-Zip: NAPLES, FL 34109

Title: MGRM (X) Change ( ) Addition  
Name: ALIAS, AVIEL  
Address: 1415 PANTHER LANE, SUITE 246  
City-St-Zip: NAPLES, FL 34109

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: MEIR ALICE

MGRM

02/21/2007

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