

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 14, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000071942	
1. Entity Name 1280 S. PINE ISLAND, LLC	

Principal Place of Business 1280 S. PINE ISLAND ROAD PLANTATION, FL 33324	Mailing Address 1280 S. PINE ISLAND ROAD PLANTATION, FL 33324
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DO NOT WRITE IN THIS SPACE



03082007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2537696	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	
KAVANAGH, PATRICK J 1280 S. PINE ISLAND RD PLANTATION, FL 33324	

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KAVANAGH, PATRICK J 590 WESTCHESTER STREET LONG BEACH, NY 11561
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MORRISSEY, MARTIN P 2022 NE 31ST STREET FT. LAUDERDALE, FL 33305
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BLACKMORE, DECLAN W 176 BRIDIES PATH SOUTH HAMPTON, NY 11968
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOCHWALD, STEVEN N 6202 NW 19TH PLACE GAINESVILLE, FL 32605
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000686472
03/23/07-80072-001 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **3/9/07** _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #