

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000159619

**FILED**  
**Apr 05, 2014**  
**Secretary of State**  
**CC8130646131**

**Entity Name:** LERDER ASSOCIATES, LLC

**Current Principal Place of Business:**

1835 EAST HALLANDALE BEACH BLVD.  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

1835 EAST HALLANDALE BEACH BLVD.  
HALLANDALE BEACH, FL 33009

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

REISER, DAVID  
1835 EAST HALLANDALE BEACH BLVD.  
HALLANDALE BEACH, FL 33009 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	REISER, DAVID	Name	REISER, LISA
Address	1835 EAST HALLANDALE BEACH BLVD.	Address	1835 EAST HALLANDALE BEACH BLVD.
City-State-Zip:	HALLANDALE BEACH FL 33009	City-State-Zip:	HALLANDALE BEACH FL 33009

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVID REISER

**MANAGING PARTNER**

**04/05/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date