

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L00000001820

1. Entity Name
11932 LONGWOOD GREEN DRIVE, LLC



Principal Place of Business
1 S.E. 3RD AVE., STE. 1940
MIAMI, FL 33131

Mailing Address
1 S.E. 3RD AVE., STE. 1940
MIAMI, FL 33131

hjk

FILED

07 APR 16 PM 4:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



03302007 No Chg-LLC

CR2E083 (11/05)

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4. FEI Number
65-0990735

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPDIRECT AGENTS, INC
515 E. PARK AVE.
TALLAHASSEE, FL 32301

**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 _____

Signature: typed or printed name of registered agent and title if applicable

(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
KLEINFELD, DENIS A
1 S.E. 3RD AVE., STE. 1940
MIAMI, FL 33131

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
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**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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

12 April 2007

Date

Daytime Phone #