

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000006563

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: 220 NORTH OCEAN PARTNERS, L.L.C.

**Current Principal Place of Business:**

220 NORTH OCEAN BLVD.  
PALM BEACH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

6501 MENLO ROAD  
MCLEAN, VA 22101

**New Mailing Address:**

FEI Number: 20-2381880

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROGERS, DOYLE  
321 ROYAL POINCIANA PLAZA  
PALM BEACH, FL 33480 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CONWAY, JOANNE BARKETT  
Address: 6501 MENLO ROAD  
City-St-Zip: MCLEAN, VA 22101

Title: AR ( ) Delete  
Name: CONWAY, WILLIAM E  
Address: 6501 MENILO RD  
City-St-Zip: MC LEAN, VA 22101

**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 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: JOANNE BARKETT CONWAY

MEMB

04/28/2008

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