2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) - DUE BY MAY 1, 2008

May 29, 2008 8:00 am Secretary of State DOCUMENT. # L01000000489 1. Entity Name 05-29-2008 90015 018 ***138.75 DEERFIELD CENTRE, L.L.C. Principal Prace of Business Mailing Address 48 EAST ROYAL PALM RD. BOCA RATON FL 33432 48 EAST ROYAL PALM RD. **BOCA RATON FL 33432** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E083 (10/07) City & State City & State 4. FEI Number Applied For 65-1067482 Not Applicable Zip Country Zic Country 18 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROBINSON, MORRIS Street Address (P.O. Box Number is Not Acceptable) 48 EAST ROYAL PALM RD. **BOCA RATON FL 33432** Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008, Fee Will Be \$538.75 Make Check Payable to Florida Department of State 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MGRM MANAGER TITLE TITLE Delete Change ■ Addition NAME ROBINSON, MORRIS STREET ADDRESS 48 EAST ROYAL PALM RD. STREET ADDRESS CITY-ST-7IP **BOCA RATON FL 33432** CHTY-ST-ZIP THILE MGRM ☐ Delete TITLE MEMBER XI Channe Addition NAME ROBINSON, CHARLOTTE NAME STREET ADDRESS 48 E ROYAL PALM RD STREET ADDRESS CITY - ST - ZIP BOCA RATON FL 33432 CITY-ST-7:P ☐ Delete DILL MEMBER MGRM Bitt **K**] Change ■ Addition BRAMNICK, HINDA NAME STHEET ADDRESS STREET ADDRESS 48 É ROYAL PALM RD CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33432** TITLE MGRM ☐ Delete **MEMBER** Change ☐ Addition ROBINSON, PHYLLIS NAME STREET ADDRESS 48 E ROYAL PALM RD STREET ADDRESS CITY-ST-ZIP BOCA RATON FL 33432 CITY-ST-ZIP THILE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition HAME STREET ADDRESS STREET ADDRESS CITY ST-7IP CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 of the empowered to execute this report as required by Chapter 608, Florida Statutes.

Morris Robinson SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE 4/2/08 Date

561.368.1852

Daytime Phono #

FILED