

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000000853

Entity Name: LMBH ASSOCAITES, L.C.

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2924 DAVIE ROAD  
#200  
DAVIE, FL 33314

**New Principal Place of Business:**

8551 W. SUNRISE BLVD.  
SUITE 301  
PLANTATION, FL 33322

**Current Mailing Address:**

P.O. BOX 696  
NAPLES, FL 34106

**New Mailing Address:**

FEI Number: 59-3734529

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

KUSHNER, LES S ESQ  
2924 DAVIE ROAD #200  
DAVIE, FL 33314 US

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

KUSHNER, LES S ESQ  
8551 W. SUNRISE BLVD.  
SUITE 301  
PLANTATION, FL 33322 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:

04/18/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HOLLINGSWORTH, LEONTINE  
Address: P O BOX 696  
City-St-Zip: NAPLES, FL 34106

I hereby 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: LEONTINE HOLLINGSWORTH

MGRM

04/18/2011

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