

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90351 030 ****50.00

DOCUMENT # L01000006454

1. Entity Name
FEDERATION HOLDINGS, II, LLC



Principal Place of Business
5890 SOUTH PINE ISLAND ROAD
DAVIE, FL 33328

Mailing Address
5890 SOUTH PINE ISLAND ROAD
DAVIE, FL 33328

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03132007

Chg-LLC

CR2E083 (12/06)

4. FEI Number
59-0967823

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WEINBAUM, MARTIN
5890 S. PINE ISLAND RD.
DAVIE, FL 33328

Name

Stillman, Eric B.

Street Address (P.O. Box Number is Not Acceptable)

5890 So. Pine Island Road

City

Davie

FL

Zip Code
33328

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

Eric B. Stillman

Eric B. Stillman

3-14-07

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

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
THE UNITED JEWISH COMMUNITY OF BROWARD COU
5890 S. PINE ISLAND RD.
DAVIE, FL 33328

☐ Delete

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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:

Eric B. Stillman

Eric B. Stillman

3/14/07

954-252-6900

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

Date

Daytime Phone #