

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000015381

FILED
Jan 08, 2004
Secretary of State

Entity Name: ALLISON PROPERTY LLC

Current Principal Place of Business:

15959 NW 15TH AVENUE
MIAMI, FL 33169 US

New Principal Place of Business:

Current Mailing Address:

15959 NW 15TH AVENUE
MIAMI, FL 33169 US

New Mailing Address:

FEI Number: 65-1139385

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARR, NEAL E ESQ.
15959 NW 15TH AVENUE
MIAMI, FL 33169 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/MEMBERS:

Title: MGR () Delete
Name: KRAMER, JEFFREY A
Address: 15959 NW 15TH AVENUE
City-St-Zip: MIAMI, FL 33169 US

Title: MGR () Delete
Name: ROSENFELD, WILLIAM W
Address: 15959 NW 15TH AVENUE
City-St-Zip: MIAMI, FL 33169 US

Title: MGR () Delete
Name: FARR, NEAL E
Address: 15959 NW 15TH AVENUE
City-St-Zip: MIAMI, FL 33169 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 for the exemption stated in Section 119.07(3)(i), 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: NEAL E. FARR

MGR

01/08/2004

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