2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# L02000007203

Entity Name: LOB, LLC

Current Principal Place of Business:

1700 SE 15TH ST
103
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

1700 SE 15TH ST
103
FORT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 04-3631501 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FLEISHER, DAVID A
1700 SE 15TH ST #103
FORT LAUDERDALE, FL 33316 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:	FLEISHER, DAVID A	
Address:	1700 SE 15TH ST #103	
City-St-Zip:	FORT LAUDERDALE, FL 33316	
Title:	MGRM	( ) Delete
Name:	SEXTON, DAVID W III	
Address:	1313 MANDARIN ISLE	
City-St-Zip:	FORT LAUDERDALE, FL 33315	
Title:	MGR	( ) Delete
Name:	FLAMM, JEFF	
Address:	925 LEMONWOOD COURT	
City-St-Zip:	HOLLYWOOD, FL 33019	
Title:	MGR	( ) Delete
Name:	FLAMM, HOWARD	
Address:	371 CHANNELSIDE WALK WAY #1003	
City-St-Zip:	TAMPA, FL 33602	
Title:	MGR	( ) Delete
Name:	FLAMM, BRUCE	
Address:	3098 LAKEWOOD CIRCLE	
City-St-Zip:	WESTON, FL 33332	
Title:	MGR	( ) Delete
Name:	SOSNOWITZ, ANDREW	
Address:	22659 N 39TH PLACE	
City-St-Zip:	PHOENIX, AZ 85050	

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:	
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 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: DAVID A. FLEISHER MGRM 05/01/2009

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