

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018614

FILED
Jan 20, 2004
Secretary of State

Entity Name: BERMAN, CLARK, FOYT, HERNANDO, PENLAND, PHILIPPEAUX AND ASSOCIATES, LLC

Current Principal Place of Business:

7300 N KENDALL DR
#740
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

7300 N KENDALL DR
#740
MIAMI, FL 33156

New Mailing Address:

FEI Number: 74-3054481 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

LEGALZOOM MEVADA INC
111 N.E. FIRST STREET
SUITE 901
MIAMI, FL 33132 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: MGRM () Delete
Name: BERMAN, ROCHELLE CFP
Address: 7300 N KENDALL DR #740
City-St-Zip: MIAMI, FL 33156

Title: MGRM () Delete
Name: CLARK, CARROLL T JR.
Address: 7300 N KENDALL DR #740
City-St-Zip: MIAMI, FL 33156

Title: MGRM () Delete
Name: HERNANDO, FRANCISCO CFP
Address: 7300 N KENDALL DR #740
City-St-Zip: MIAMI, FL 33156

Title: MGRM () Delete
Name: PENLAND, WILLIAM JR
Address: 7300 N KENDALL DR #740
City-St-Zip: MIAMI, FL 33156

Title: MGRM () Delete
Name: PHILIPPEAUZ, JAMES
Address: 7300 N KENDALL DR #740
City-St-Zip: MIAMI, FL 33156

Title: () Delete
Name:
Address:
City-St-Zip:

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: MGRM (X) Change () Addition
Name: PHILIPPEAUX, JAMES
Address: 7300 N KENDALL DR #740
City-St-Zip: MIAMI, FL 33156

Title: MGRM () Change (X) Addition
Name: FOYT, JOHN
Address: 7300 N KENDALL DR # 740
City-St-Zip: MIAMI, FL 33156

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: JAMES PHILIPPEAUX

MGRM

01/20/2004

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