# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Mar 01, 2007**
**Secretary of State**

DOCUMENT# L02000019916

**Entity Name:** CLIFFORD ST. PETERSBURG, LLC

**Current Principal Place of Business:**

343 WAINWRIGHT DRIVE
NORTHBROOK, IL 60062

**New Principal Place of Business:**

520 LAKE COOK ROAD
SUITE 105
DEERFIELD, IL 60015

**Current Mailing Address:**

343 WAINWRIGHT DRIVE
NORTHBROOK, IL 60062

**New Mailing Address:**

520 LAKE COOK ROAD
SUITE 105
DEERFIELD, IL 60015

**FEI Number: 82-0557418** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: MGR ( ) Delete
Name: WEBSTER, III, MILTON P MGR
Address: 343 WAINWRIGHT DRIVE
City-St-Zip: NORTHBROOK, IL 60062

Title: MGR (X) Delete
Name: GOLDSTEIN, BRUCE I MGR
Address: 343 WAINWRIGHT DRIVE
City-St-Zip: NORTHBROOK, IL 60062

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition
Name: SCHNEIDER, GREGG
Address: 520 LAKE COOK ROAD
City-St-Zip: DEERFIELD, IL 60015

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 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: GREGG SCHNEIDER MGR 03/01/2007

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