2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000020085

1713 S OCEAN BLVD

MGRM

DELRAY BEACH, FL 33483

DIAMOND, R. NICHOLAS

CORAL SPRINGS, FL 33065

9720 NW 39TH CT

() Delete

Address:

Name:

Address:

City-St-Zip:

City-St-Zip:

Entity Name: CITY CENTER BUSINESS OFFICES, LLC

FILED Jul 02, 2004 Secretary of State

Current Principal Place of Business:		New Principal P	New Principal Place of Business:	
401 EAST LAS OLAS BLVD			401 EAST LAS OLAS BLVD	
#1400 FORT LAUDERDALE, FL 33394			#1400 FORT LAUDERDALE, FL 33301	
Current Mailing Address:		New Mailing Ad	New Mailing Address:	
401 EAST LAS OLAS BLVD			401 EAST LAS OLAS BLVD	
#1400 FORT LAUDERDALE, FL 33394		#1400 FORT LAUDERDALE, FL 33301		
FEI Number:	01-0746273 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:		Name and Addre	Name and Address of New Registered Agent:	
STE 1400 FORT LAU	LAS OLAS BLVD IDERDALE, FL 33394 US	surpass of shanging its regi	ptorod office or registered agent or both	
	named entity submits this statement for the period of Florida.	ourpose of changing its regi	stered office or registered agent, or both	
SIGNATUR				
	Electronic Signature of Registered Age	ent	Date	
MANAGING MEMBERS/MEMBERS:		ADDITIONS/CH/	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR () Delete SNORP, P 100 NE WAVE CREST CT BOCA RATON, FL 33432	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete MOORE, RICHARD J 1924 NE 231 AVE FORT LAUDERDALE, FL 33325	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete MORRISON, R. SCOTT 243 NE 5TH AVE DELRAY BEACH, FL 33483	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGR () Delete CORKIN, HERBERT 445 GRAND BAY DR KEY BISCAYNE, FL 33149	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	MGR () Delete DIAMOND, GERALD	Title: Name:	() Change () Addition	

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.

Address:

Title:

Name:

Address:

City-St-Zip:

City-St-Zip:

() Change () Addition

SIGNATURE: NICHOLAS DIAMOND MGRM 07/02/2004