

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000023684

FILED
Jan 23, 2007
Secretary of State

Entity Name: PORTICOS 3837 LLC

Current Principal Place of Business:

3837 NORTHWEST BOCA RATON BOULEVARD
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

3837 NORTHWEST BOCA RATON BOULEVARD
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 35-2180687

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAINES, ANDREW
2101 NORTHWEST 33RD STREET
SUITE 300
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

GAINES, ANDREW
2985 CENTER PORT CIRCLE
SUITE 1
POMPANO BEACH, FL 33064 US

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: ANDREW GAINES

01/23/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GAINES, ANDREW
Address: 3873 NORTHWEST BOCA RATON BOULEVARD
City-St-Zip: BOCA RATON, FL 334315858 US

Title: M () Delete
Name: GAINES, PATRICK S
Address: 3837 NORTHWEST BOCA RATON BOULEVARD
City-St-Zip: BOCA RATON, FL 334315858 US

Title: M () Delete
Name: FITZGIBBON, ROBERT F
Address: 3837 NORTHWEST BOCA RATON BOULEVARD
City-St-Zip: BOCA RATON, FL 334315858 US

Title: M () Delete
Name: SMITH, MITCHELL K
Address: 3837 NORTHWEST BOCA RATON BOULEVARD
City-St-Zip: BOCA RATON, FL 334315858 US

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: GAINES, PATRICK S
Address: 3837 NORTHWEST BOCA RATON BOULEVARD
City-St-Zip: BOCA RATON, FL 334315858 US

Title: MGRM (X) Change () Addition
Name: FITZGIBBON, ROBERT F
Address: 3837 NORTHWEST BOCA RATON BOULEVARD
City-St-Zip: BOCA RATON, FL 334315858 US

Title: MGRM (X) Change () Addition
Name: SMITH, MITCHELL K
Address: 3837 NORTHWEST BOCA RATON BOULEVARD
City-St-Zip: BOCA RATON, FL 334315858 US

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: ANDREW GAINES

MGRM

01/23/2007

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