2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000025906

1. Entity Name LAKE WORTH ROAD ASSOCIATES, LLC



08 MAY 13 AM 8: 15

Principal Place of Business 1541 SUNSET DRIVE, #300 CORAL GABLES, FL 33143 Mailing Address

1541 SUNSET DRIVE, #300 CORAL GABLES, FL 33143



SECRETARY OF STATE TALLAHASSEE. FLORIDA

03172008 No Chg-LLC

CR2E083 (12/07)

305-666 2140

4.	FEI Number		Applied For
	43-1976891	Г	Not Applicable
5.	Certificate of Status Desired	\$5.00 Fee Re	Additional quired

6. Name and Address of Current Registered Agent

ROSE, ELLEN ESQ THERREL BAISDEN, P.A. ONE SE 3RD AVENUE, STE. 2400 MIAMI, FL 33131

SIGNATURE

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	named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or both, in the	ne State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable,	(NOTE: Registered Agent signature required when reinstating)	DATE
FILE After May	NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75	* 300 05/08/08	128791413 01009022 **777.50
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM HIGIER, GERALD M 1541 SUNSET DRIVE, #300 CORAL GABLES, FL 33143		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO N	OT WRITE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

RIZED REPRESENTATIVE