


**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 28, 2005 8:00 am**  
**Secretary of State**

04-28-2005 90024 004 \*\*\*\*55.00

<b>DOCUMENT # L02000031020</b>	
1. Entity Name SWERDLOW/BOCA DEVELOPERS GROUP, LLC	

Principal Place of Business <del>18755 BISCAYNE BLVD.</del> AVENTURA, FL 33180	Mailing Address 321 EAST HILLSBORO BLVD DEERFIELD BEACH, FL 33441
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14002797

2. Principal Place of Business 2200 N.E. 143rd Street	3. Mailing Address
Suite, Apt. #, etc. Suite 100	Suite, Apt. #, etc.

City & State North Miami, Florida	City & State
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Zip 33181	Country USA	Zip	Country
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02242005 Chg-LLC CR2E083 (10/03)

4. FEI Number 81-0581446	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required
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<b>6. Name and Address of Current Registered Agent</b>	<b>7. Name and Address of New Registered Agent</b>
STOTZER, THEODORE R C/O SWERDLOW BOCA DEVELOPERS GROUP, LLC 321 EAST HILLSBORO BLVD DEERFIELD BEACH, FL 33441	Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code

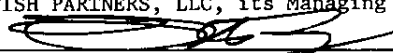
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>Filing Fee is \$50.00 Due by May 1, 2005</b>	<b>Make check payable to Florida Department of State</b>
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9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SWERDLOW LIGHTSPEED MANAGEMENT COMPANY LLC 3390 MARY STREET, SUITE 200 MIAMI, FL 33133 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BONEFISH PARTNERS, LLC 3390 Mary Street, Suite 200 Coconut Grove, Florida 33133 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM NORTH MIAMI LAND HOLDINGS, LTD. 321 East Hillsboro Blvd. Deerfield Beach, Florida 33441 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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.

BY: BONEFISH PARTNERS, LLC, its Managing Member  
**SIGNATURE:** By:  April 15, 2005 (954) 949-3480  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE  
Theodore R. Stotzer, Executive Vice President Date Daytime Phone #