

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000032501

**FILED**  
**Feb 01, 2008**  
**Secretary of State**

**Entity Name:** EDISON '59 T/A, SANTOS ASSOCIATES-ACCOUNTANTS, LIMITED COMPANY

**Current Principal Place of Business:**

4641 SO UNIVERSITY DRIVE  
DAVIE, FL 333283817 US

**New Principal Place of Business:**

1961 N W 150TH AVENUE  
104  
PEMBROKE PINES, FL 330282876 US

**Current Mailing Address:**

4641 SO UNIVERSITY DRIVE  
DAVIE, FL 333283817 US

**New Mailing Address:**

1961 N W 150TH AVENUE  
104  
PEMBROKE PINES, FL 330282876 US

**FEI Number:** 59-1483079

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EDWARD J. SANTOS  
4641 SO UNIVERSITY DRIVE  
DAVIE, FL 333283817 US

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

EDWARD J. SANTOS  
1961 N W 150TH AVENUE  
104  
PEMBROKE PINES, FL 330282876 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:** EDWARD J SANTOS

02/01/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** SANTOS, EDWARD J G/M  
**Address:** 4641 S. UNIVERSITY DRIVE  
**City-St-Zip:** DAVIE, FL 333283817

**Title:** MGRM ( ) Delete  
**Name:** SANTOS, PATRICIA A AST G/M  
**Address:** 4641 S. UNIVERSITY DRIVE  
**City-St-Zip:** DAVIE, FL 333283819

**Title:** MGRM ( ) Delete  
**Name:** HURST, BETH A 1STVG/M  
**Address:** 4641 SO UNIVERSITY DRIVE  
**City-St-Zip:** DAVIE, FL 333283817

**Title:** MGRM ( ) Delete  
**Name:** GOLIS, PATRICIA A 2NDVG/M  
**Address:** 4641 SO UN IVERSITY DRIVE  
**City-St-Zip:** DAVIE, FL 333283817

**Title:** MGRM ( ) Delete  
**Name:** STEVENS, SUSAN A 3RDVG/M  
**Address:** 4641 SO UNIVERSITY DRIVE  
**City-St-Zip:** DAVIE, FL 333283817

**Title:** MGRM ( ) Delete  
**Name:** SANTOS, EDNA A 4THVG/M  
**Address:** 4641 SO UNIVERSITY DRIVE  
**City-St-Zip:** DAVIE, FL 333283817

**ADDITIONS/CHANGES:**

**Title:** MGRM (X) Change ( ) Addition  
**Name:** SANTOS, EDWARD J G/M  
**Address:** 1961 N W 150TH AVE, STE 104  
**City-St-Zip:** PEMBROKE PINES, FL 330282876 US

**Title:** MGRM (X) Change ( ) Addition  
**Name:** SANTOS, PATRICIA A AST G/M  
**Address:** 1961 N W 150TH AVE, STE 104  
**City-St-Zip:** PEMBROKE PINES, FL 330282876 US

**Title:** MGRM (X) Change ( ) Addition  
**Name:** HURST, BETH A 1STVG/M  
**Address:** 1961 N W 150TH AVE, STE 104  
**City-St-Zip:** PEMBROKE PINES, FL 330282876 US

**Title:** MGRM (X) Change ( ) Addition  
**Name:** GOLIS, PATRICIA A 2NDVG/M  
**Address:** 1961 N W 150TH AVE, STE 104  
**City-St-Zip:** PEMBROKE PINES, FL 330282876 US

**Title:** MGRM (X) Change ( ) Addition  
**Name:** STEVENS, SUSAN A 3RDVG/M  
**Address:** 1961 N W 150TH AVE, STE 104  
**City-St-Zip:** PEMBROKE PINES, FL 330282876 US

**Title:** MGRM (X) Change ( ) Addition  
**Name:** MODLICS, EDNA A 4THVG/M  
**Address:** 1961 N W 150TH AVE, STE 104  
**City-St-Zip:** PEMBROKE PINES, FL 330282876 US

I hereby certify that the information supplied with this filing does not qualify 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:** EDWARD J SANTOS

MGRM

02/01/2008

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