2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000007602

1. Entity Name

MERLION HOLDINGS IV, L.L.C.



FILED
Jan 18, 2005 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

400 PALOMA AVENUE BOCA RATON, FL 33486 400 PALOMA AVENUE BOCA RATON, FL 33486



01122005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 54-2103101

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DICKENSON, DAVID B ESQ 980 NORTH FEDERAL HWY STE 410 BOCA RATON, FL 33432

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The above named entity submits this statement for the purpose of chan the obligations of registered agent.	nging its registered office or registered agent	t, or both, in the St	ate 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 reinst	ating)	DATE

Filing Fee is \$50.00 Due by May 1, 2005

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ļ	9	9. MANAGING MEMBERS/MANAGERS			
i	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROSS, KEVIN M 1324 SYCAMORE TER BOCA RATON, FL 33486			
	NITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CARLSON, JAN 400 PALOMA AVE BOCA RATON, FL 33486			
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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 significant same legal effect as if made under oath; that I am a managing member or manager of the limited liability company of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/12/05

Daytime Phone #