

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 09, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000010933

1. Entity Name
SSA & S REALTY I, LLC



Principal Place of Business
**PO BOX 273408
BOCA RATON, FL 33427**

Mailing Address
**PO BOX 273408
BOCA RATON, FL 33427**

DO NOT WRITE IN THIS SPACE



01042007No Chg-LLC

CR2E083 (11/05)

4. FEI Number
11-3683263

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

**SIGEL, MARSHALL E
7380 MANDARIN DRIVE
BOCA RATON, FL 33433**

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
SIGEL, MARSHALL E
PO BOX 273408
BOCA RATON, FL 33427**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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000000580461
01/10/07-80048-012 55.00

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IN THIS SPACE**

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.

SIGNATURE: _____

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

MARSHALL E SIGEL, MANAGER

Date

Daytime Phone #

1/11/07 (561) 482-2211