


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 05, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000027742		
1. Entity Name DEBFI IV, L.L.C.		
Principal Place of Business 5125 SUFFOLK DRIVE BOCA RATON, FL 33496	Mailing Address 5125 SUFFOLK DRIVE BOCA RATON, FL 33496	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent MALLINGER, MARTIN R C/O LANDIS & MALLINGER, P.L. 980 NORTH FEDERAL HIGHWAY, SUITE 302 BOCA RATON, FL 33432		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-instating)</small>		
DATE _____		
Filing Fee is \$50.00 Due by September 7, 2005		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STEIN, DEBORAH G 5125 SUFFOLK DRIVE BOCA RATON, FL 33496	DO NOT WRITE IN THIS SPACE
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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 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: <u>Deborah Stein</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<u>7/29/05</u> <u>361-997-905</u> <small>Date Daytime Phone #</small>



07292005No Chg-LLC CR2E083 (10/03)

4. FEI Number 57-1181793	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

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08/05/05-80009-025 50.00