

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000051086

FILED  
Apr 11, 2008  
Secretary of State

Entity Name: IPS WEST PALM, LLC

**Current Principal Place of Business:**

1500 SAN REMO AVENUE, SUITE 300  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

**Current Mailing Address:**

1500 SAN REMO AVENUE, SUITE 300  
CORAL GABLES, FL 33146

**New Mailing Address:**

FEI Number: 20-0437865

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

OLANELL, MICHAEL M  
1500 SAN REMO AVE, SUITE 300  
MIAMI, FL 33146 US

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

STATTNER, ALLISON M  
1500 SAN REMO AVE, SUITE 300  
MIAMI, FL 33146 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: ALLISON M. STATTNER

04/11/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: STATTNER, STEVE  
Address: 1500 SAN REMO AVENUE, SUITE 300  
City-St-Zip: CORAL GABLES, FL 33146

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: STATTNER, STEVE  
Address: 1500 SAN REMO AVENUE, SUITE 300  
City-St-Zip: CORAL GABLES, FL 33146

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: STEVEN STATTNER

MGRM

04/11/2008

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