2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000054541

1. Entity Name

FPL PARTNERS, LLC

FILED Jan 30, 2008 08:00 AM Secretary of State

Principal Place of Business

3300 N. 29TH AVENUE

#101

HOLLYWOOD, FL 33020

Mailing Address

3300 N. 29TH AVENUE

#101

HOLLYWOOD, FL 33020

.____



01042008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 57-1238554

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DAVID, BENNETT L III 3300 N. 29TH AVENUE

#101

HOLLYWOOD, FL 33020

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the St	tate of Florida. I am familiar with, and accept
the obligations of registered agent.	,,,,,

US

SIGNATURE.

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

(NOTE: Registered Agent aignature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PEP MANAGEMENT, INC. 3300 N. 29TH AVENUE, #101 HOLLYWOOD, FL 33020
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS	

000000804372 02/05/08-80066-010 138.75

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling 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 of the receiver of trustee empowered to execute this report as required by Chapter 608. Florida Statutes

SIGNATURE

CITY-ST-ZIP

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

1/24/08

954-925-7/m

Daytime Ph