

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 02, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # L04000010927

1. Entity Name  
ZAND FAMILY HOLDINGS, L.L.C.



Principal Place of Business  
300 S. PINE ISLAND ROAD, STE. 110  
PLANTATION, FL 33324

Mailing Address  
300 S. PINE ISLAND ROAD, STE. 110  
PLANTATION, FL 33324



01302007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-0721764	Applied For Not Applicable
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5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

FISCHER, STEVEN P  
300 S. PINE ISLAND ROAD, STE. 110  
PLANTATION, FL 33324

**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	MGR
NAME	FISCHER, STEVEN P
STREET ADDRESS	300 S. PINE ISLAND ROAD, STE. 110
CITY-ST-ZIP	PLANTATION, FL 33324

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03/13/07-80034-025 50.00

**DO NOT WRITE  
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

Date

Daytime Phone #

2/28/07 954/370 0300