

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jul 24, 2008 8:00 am**  
**Secretary of State**

07-24-2008 90045 006 \*\*\*138.75

**DOCUMENT # L04000015372**

1. Entity Name  
11190 BISCAYNE, LLC



Principal Place of Business  
ATTN: SR. COUNSEL  
504 CARNEGIE CENTER  
PRINCETON, NJ 08542

Mailing Address  
ATTN: SR. COUNSEL  
504 CARNEGIE CENTER  
PRINCETON, NJ 08542

50008882



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07102008 Chg-LLC CR2E083 (12/06)

City & State

City & State

4. FEI Number  
NOT APPLICABLE

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

**FILE NOW!!! FEE IS \$138.75**  
**Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete  
NAME HAMILL, JOHN P  
STREET ADDRESS 11190 BISCAYNE BLVD.  
CITY-ST-ZIP MIAMI, FL 33181

TITLE M, T ☒ Change ☐ Addition  
NAME HAMILL, JOHN P.  
STREET ADDRESS 504 CARNEGIE CTR.  
CITY-ST-ZIP PRINCETON NJ 08540

TITLE MGR ☐ Delete  
NAME MCMULLEN, JEFFREY P  
STREET ADDRESS 11190 BISCAYNE BLVD.  
CITY-ST-ZIP MIAMI, FL 33181

TITLE M, P ☒ Change ☐ Addition  
NAME MCMULLEN, JEFFREY P.  
STREET ADDRESS 504 CARNEGIE CTR.  
CITY-ST-ZIP PRINCETON NJ 08540

TITLE MGR ☐ Delete  
NAME NEWMAN, THOMAS J  
STREET ADDRESS 11190 BISCAYNE BLVD.  
CITY-ST-ZIP MIAMI, FL 33181

TITLE S ☐ Change ☒ Addition  
NAME DEITZ, ROBERT  
STREET ADDRESS 504 CARNEGIE CTR.  
CITY-ST-ZIP PRINCETON NJ 08540

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

JOHN P. HAMILL, CFO + TREASURER - 7/11/08

609-951-6800