


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000028643

1. Entity Name
 1901 S. ANDREWS AVE., LLC



Principal Place of Business 1901 S ANDREWS AVE FORT LAUDERDALE, FL 33316	Mailing Address 884 US HWY 1 NORTH PALM BEACH, FL 33408
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DO NOT WRITE IN THIS SPACE



01122008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 37-0724232	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BOWLING, ROBERT C
 1680 N.E. 135 STREET
 NORTH MIAMI, FL 33181

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	MGRM BOWLING, ROBERT C 1680 N.E. 135 STREET NORTH MIAMI, FL 33181
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM VERNIS, G. JEFFREY 884 U.S. HIGHWAY ONE NORTH PALM BEACH, FL 33408
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 05/18/08-80038-005 138.75

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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:  **4-23-08** **561-775-9882**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #