2008 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000035287

1. Entity Name MCNAB ASSOCIATES, LLC



FILED Jan 31, 2008 08:00 AN **Secretary of State**

Principal Place of Business

2500 NORTH FEDERAL HIGHWAY, STE. 201 FORT LAUDERDALE, FL 33305

Mailing Address

2500 NORTH FEDERAL HIGHWAY, STE. 201 FORT LAUDERDALE, FL 33305



01092008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 14-3122572

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

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

6. Name and Address of Current Registered Agent

DIRKSEN, VOLKMAR 2500 NORTH FEDERAL HIGHWAY, STE. 201 FORT LAUDERDALE, FL 33305

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

SIGNATURE

(NOTE: Registered Agent signature required when reinstating)

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

000000806963 02/06/08-80063-001 138.75

9.	MANAGING MEMBERS/MANAGERS	[19] [1] [1] [1] [1] [1] [1] [1] [1] [1] [1
TITLE	MGR	
NAME	DIRKSEN, VOLKMAR	
STREET ADDRESS	2500 NORTH FEDERAL HIGHWAY, STE. 201	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33305	
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NAME		
STREET ADDRESS		
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CITY-ST-ZIP		DO NOT WRITE
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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 AND DIFFED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE