

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000039118

FILED
Jul 09, 2007
Secretary of State

Entity Name: MCNAB COMMERCIAL CENTER NO. 1, LLC

Current Principal Place of Business:

888 SE THIRD AVE., SUITE 501
FT. LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

888 SE THIRD AVE., SUITE 501
FT. LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 20-1266573 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

H. COLLINS FORMAN, JR., P.A.
1323 SE THIRD AVENUE
FT. LAUDERDALE, FL 33316 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: TRUST 1 MCNAB PROPER, TIES LLC
Address: 888 SE THIRD AVE., SUITE 501
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: MGR () Delete
Name: HAMILTON MCNAB PROPE, RTIES, LLC
Address: 1524 CORAL RIDGE DRIVE
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: MGR () Delete
Name: FORMAN, M. AUSTIN
Address: 888 SE 3RD AVE, STE 501
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: M. AUSTIN FORMAN

MGR

07/09/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date