


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 30, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L04000045732</b> 1. Entity Name RALPH FAMILY COMPANY, LLC	
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Principal Place of Business 333 FARMINGTON DRIVE PLANTATION, FL 33317 US	Mailing Address 333 FARMINGTON DRIVE PLANTATION, FL 33317 US
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01192007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 75-3159044	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  RALPH, JONATHAN D M.D. 333 FARMINGTON DRIVE PLANTATION, FL 33317
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reissuing)</small>	DATE _____

**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RALPH, FRANCINE B 333 FARMINGTON DRIVE PLANTATION, FL 33317
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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: <i>Francine B. Ralph</i> <u>Francine B. Ralph</u> <u>1/23/2007</u> <u>584-7101</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>