

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000049717

FILED
Apr 03, 2011
Secretary of State

Entity Name: FMS ASSOC., LLC

Current Principal Place of Business:

200 MACFAR LANE DR.
APT.502
DEL RAY BEACH, FL 33483

New Principal Place of Business:

Current Mailing Address:

200 MACFAR LANE DR.
APT.502
DEL RAY BEACH, FL 33483

New Mailing Address:

FEI Number: 51-0517395

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAZUR,SCHLOSSBERG JOY
200 MAC FARLANE DRIVE,
APT.502
DELRAY BEACH, FL 33483 US

Name and Address of New Registered Agent:

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: MGRM
Name: SCHLOSSBERG, JOY MAZUR
Address: 200 MACFAR LANE DR. #502
City-St-Zip: DEL RAY BEACH, FL 33483

Title: MGRM
Name: FRIEDMAN, ALLAN
Address: 200 MACFAR LANE DR. #502
City-St-Zip: DEL RAY BEACH, FL 33483

Title: MGRM
Name: FRIEDMAN, ARNA
Address: 200 MACFAR LANE DR. #502
City-St-Zip: DEL RAY BEACH, FL 33483

Title: MGR
Name: SCHLOSSBERG, ALAN
Address: 200 MACFARLANE DRIVE #502
City-St-Zip: DELRAY BEACH, FL 33483 US

I hereby 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: ALAN SCHLOSSBERG

MGR

04/03/2011

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