

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000054720

FILED  
Feb 01, 2007  
Secretary of State

Entity Name: BOBS LLC

**Current Principal Place of Business:**

8751 W. BROWARD BLVD.  
SUITE 305  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

8751 W. BROWARD BLVD.  
SUITE 305  
PLANTATION, FL 33324

**New Mailing Address:**

FEI Number:                      FEI Number Applied For (X)                      FEI Number Not Applicable ( )                      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COTLER, CRAIG B  
8751 W. BROWARD BLVD.  
SUITE 305  
PLANTATION, FL 33324 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 ( ) Delete  
Name: FARRELL, LAWRENCE C JR.  
Address: 8751 W. BROWARD BLVD. #305  
City-St-Zip: PLANTATION, FL 33324

Title: MGRM ( ) Delete  
Name: MADDOX, ROTH A  
Address: 8751 W. BROWARD BLVD. #305  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES:**

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 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: LAWRENCE C. FARRELL, JR.                      MGRM                      02/01/2007

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