2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073013

Entity Name: THE WHOLE MISCHPOCHE LLC

LEVITTOWN, PA 19057 US

City-St-Zip:

FILED Jan 16, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2790 OAKBROOK LANE WESTON, FL 33332 **Current Mailing Address: New Mailing Address:** 2790 OAKBROOK LANE WESTON, FL 33332 US FEI Number: 20-1702084 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SCHWARTZ, STEPHEN M 2790 OAKBROOK LANE WESTON, FL 33332 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/MEMBERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete SCHWARTZ, STEPHEN M Name: Name: 2790 OAKBROOK LANE Address: Address: City-St-Zip: WESTON, FL 33332 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition COLEMAN, LEONARD B Name: Name: Address: 155 OAKCREEK ROAD Address: City-St-Zip: EAST WINDSOR, NJ 08520 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition RIFKIN, HARVEY S Name: Name: 798 TWIN RIVERS DRIVE NORTH Address: Address: City-St-Zip: EAST WINDSOR, NJ 08520 US City-St-Zip: () Delete Title: MGRM Title: () Change () Addition Name: SCHWARTZ, ROBERT C Name: Address: 3251 NOTTINGHAM WAY Address: City-St-Zip: HAMILTON, NJ 08619 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition RIFKIN, ALLISON D Name: Name: 44 ALBURY WAY Address: Address: NORTH BRUNSWICK, NJ 08902 US City-St-Zip: City-St-Zip: Title: MGRM () Delete Title: () Change () Addition LIPKIN, RANDI S Name: Name: Address: 22 LAUREN COURT Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: STEPHEN M. SCHWARTZ MGRM 01/16/2005