

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086125

Entity Name: ANDREWS VILLAGE LLC

FILED  
Jan 26, 2009  
Secretary of State

## Current Principal Place of Business:

C/O MAYNARD RICH COS.  
450 N. PARK RD. #500  
HOLLYWOOD, FL 33021

## New Principal Place of Business:

## Current Mailing Address:

C/O MAYNARD RICH COS.  
450 N. PARK RD. #500  
HOLLYWOOD, FL 33021

## New Mailing Address:

FEI Number: 25-1908921

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHWARTZ, RICHARD  
450 N. PARK RD.  
#500  
HOLLYWOOD, FL 33021 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: SCHWARTZ, RICHARD  
Address: 450 N. PARK RD. #500  
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM ( ) Delete  
Name: MAYNARD, CARL  
Address: 450 N. PARK RD  
City-St-Zip: HOLLYWOOD, FL 33021

Title: MGRM ( ) Delete  
Name: DISKIN, JACK  
Address: 4230 ROYAL PALM AVE.  
City-St-Zip: MIAMI BEACH, FL 33140

Title: MGRM ( ) Delete  
Name: SEACH, MARK  
Address: 12677 WHITE CORAL DR  
City-St-Zip: WELLINGTON, FL 33414

## 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:

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: RICHARD SCHWARTZ

MGRM

01/26/2009

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