

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086125

Entity Name: ANDREWS VILLAGE LLC

FILED
Feb 01, 2010
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:

C/O CPRG
2937 W CYPRESS CREEK RD, SUITE 101
FORT LAUDERDALE, FL 33309

Current Mailing Address:

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

New Mailing Address:

C/O CPRG
2937 W CYPRESS CREEK RD, SUITE 101
FORT LAUDERDALE, FL 33309

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:

SCHWARTZ, RICHARD
2937 W CYPRESS CREEK RD, SUITE 101
101
FORT LAUDERDALE, FL 33309 US

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: RICHARD SCHWARTZ

02/01/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: SCHWARTZ, RICHARD
Address: 2937 W CYPRESS CREEK RD, SUITE 101
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGRM
Name: MAYNARD, CARL
Address: 2937 W CYPRESS CREEK RD, SUITE 101
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGRM
Name: DISKIN, JACK
Address: 2937 W CYPRESS CREEK RD, SUITE 101
City-St-Zip: FORT LAUDERDALE, FL 33309

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

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: RICHARD SCHWARTZ

MGRM

02/01/2010

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