

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088413

FILED  
Aug 05, 2008  
Secretary of State

**Entity Name:** BUTTONWOOD BAY DEVELOPMENT LLC

**Current Principal Place of Business:**

1117 HOLLYWOOD BLVD.  
HOLLYWOOD, FL 33019

**New Principal Place of Business:**

**Current Mailing Address:**

1117 HOLLYWOOD BLVD.  
HOLLYWOOD, FL 33019

**New Mailing Address:**

**FEI Number:** 20-1848839      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

WAID, WILL  
1117 HOLLYWOOD BOULEVARD  
HOLLYWOOD, FL 33019      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR      ( ) Delete  
Name: WAID, WILLIAM  
Address: 1117 HOLLYWOOD BLVD.  
City-St-Zip: HOLLYWOOD, FL 33019

Title: ST      ( ) Delete  
Name: WAID, WILLIAM  
Address: 1117 HOLLYWOOD BLVD.  
City-St-Zip: HOLLYWOOD, FL 33019

**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 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: WILLIAM WAID

MNGR

08/05/2008

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