

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000089468

FILED
Apr 21, 2008
Secretary of State

Entity Name: 703 APOGEE, LLC

Current Principal Place of Business:

500 SOUTH POINTE DRIVE
230
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

500 SOUTH POINTE DRIVE
230
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 83-0452623

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRIEGER, JEFFREY
500 SOUTH POINTE DRIVE
230
MIAMI BEACH, FL 33139 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: FRANCO, JACK
Address: 500 SOUTH POINTE DRIVE, SUITE 210
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: LENNON, JOHN
Address: 500 SOUTH POINTE DRIVE, SUITE 210
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: KRIEGER, JEFFREY
Address: 500 SOUTH POINTE DRIVE, SUITE 230
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: KRIEGER, MATTHEW
Address: 500 SOUTH POINTE DRIVE, SUITE 230
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: ADLER, DANIEL
Address: C/O 500 SOUTH POINTE DRIVE, SUITE 230
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM () Delete
Name: ROSEN, JERALD
Address: C/O 500 SOUTH POINTE DRIVE, SUITE 230
City-St-Zip: MIAMI BEACH, FL 33139

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
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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: JEFFREY KRIEGER

MGRM

04/21/2008

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