

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000090715

FILED  
Apr 06, 2007  
Secretary of State

Entity Name: FOUR PATELS LLC

## Current Principal Place of Business:

1501 NORTH POINTE PARKWAY, SUITE 100  
WEST PALM BEACH, FL 33407

## New Principal Place of Business:

1501 NORTHPOINT PARKWAY, SUITE 100  
WEST PALM BEACH, FL 33407

## Current Mailing Address:

1501 NORTH POINTE PARKWAY, SUITE 100  
WEST PALM BEACH, FL 33407

## New Mailing Address:

1501 NORTHPOINT PARKWAY, SUITE 100  
WEST PALM BEACH, FL 33407

FEI Number: 20-2017984

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HUDSON, BILL  
1501 NORTH POINTE PARKWAY, SUITE 100  
WEST PALM BEACH, FL 33407 US

## Name and Address of New Registered Agent:

HUDSON, BILL  
1501 NORTHPOINT PARKWAY, SUITE 100  
WEST PALM BEACH, FL 33407 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: BILL HUDSON

04/06/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: HUDSON, BILL  
Address: 1501 NORTH POINTE PARKWAY, SUITE 100  
City-St-Zip: WEST PALM BEACH, FL 33407

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: HUDSON, BILL  
Address: 1501 NORTHPOINT PARKWAY, SUITE 100  
City-St-Zip: WEST PALM BEACH, FL 33407

I hereby certify that the information supplied with this filing does not qualify for the 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: BILL HUDSON

MGR

04/06/2007

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