#### 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

#### Mar 31, 2008 8:00 am **Secretary of State DOCUMENT # L05000001716** 03-31-2008 90265 045 \*\*\*143.75 COPÁNS DIXIE LLC Principal Place of Business Mailing Address 60018180 450 EAST COPANS ROAD 450 EAST COPANS ROAD POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03242008 Chg-LLC CR2E083 (12/06) Applied For City & State City & State 4. FEI Number 52-3449498 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent COPAN, DIXIE LLC Street Address (P.O. Box Number is Not Acceptable) 450 EAST CYPRESS RD POMPANO BEACH, FL 33064 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGR TITLE ☐ Delete TITLE Addition ☐ Change NAME MCINTYRE, HART STREET ADDRESS 450 EAST COPANS ROAD STREET ADDRESS CITY - ST- ZIP CITY - ST- ZIP POMPANO BEACH, FL 33064 TITLE ☐ Delete TITLE ☐ Change ■ Addition STRUL, AUBREY NAME NAME STREET ADDRESS 450 EAST COPANS ROAD STREET ADDRESS POMPANO BEACH, FL 33064 CITY - ST - ZIP CITY-ST-ZIP ST ☐ Delete TITLE TITLE ☐ Change ☐ Addition SABGA, EMILE NAME NAME 450 EAST COPANS ROAD STREET ADDRESS STREET ADDRESS CITY - ST - ZIP POMPANO BEACH, FL 33064 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TIFLE ☐ Delete TITLE ☐ Change \_\_\_ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGE

NAME

STREET ADDRESS

CITY-ST-ZIP

MBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

782-2221

**FILED** 

Daytime Phone #

# Copans Dixie, LLC ATTACHMENT

60018180

March 24, 2008

Division of Corporations P.O. Box 8800 Tallahassee, Florida 32314

RE: Document # L05000001716 Copans Dixie, LLC

Dear Sir or Madam:

Enclosed is Copans Dixie, LLC's 2008 Limited Liability Company Annual Report with a Federal Tax ID number (FEI) change. It appears there may have been a typo at some point in the number entered into the state system.

Attached is a copy of the IRS notice with the correct tax id number. The IRS notice shows the name of the corporation as Dixie Copans LLC, when in fact it is Copans Dixie, LLC (see attached Articles of Incorporation). The state has the correct name on the annual report. A name change correction was made with the IRS on the 2007 Federal return. Please see the attached first page of the return with the name change box marked. This is the process the IRS requires a corporation to follow to make a name change. The IRS does not reissue a corrected FEI notice.

Please use these documents to make the FEI number change on the state's 2008 Limited Liability Company Annual Report for Copans Dixie, LLC. If you have any questions, please contact Susan Parham at (954) 782-2221 Ext: 103.

Sincerely:

R. Hart McIntyre Managing Member

Enc:

hfhunter

508-528-4864

p.3

X

ATTACHMENT 600 18180

IRS DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE P.O. BOX 9003 HOLTSVILLE NY 11742-900 11742-9003 # [150000017/4

006302.160114.0027.001 1 MB 0.309 702  Date of this notice: 01-27-2005 Employer Identification Number: 52-2449498

Form: \$5-4

Number of this notice: CP 575 B

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

DIXIE COPANS LLC SABGA EMILE MBR 450 E COPANS RD POMPANO BEACH FL

33064

#### WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an EIN. We assigned you EIN 52-2449498. This EIN will identify your business account, tax returns, and documents, even if you have no amployees. Please keep this notice in your permanent records.

When filing tax documents, please use the label IRS provided. If that isn't possible you should use your EIN and complete name and address shown above on all federal tax forms, payments and related correspondence. If this information isn't correct, please correct it using the tear off stub from this notice. Return it to us so we can correct your account. If you use any variation of your name or EIN, doing so could cause a delay in processing and may result in incorrect information in your account. Doing so could result in our assigning you more than one EIN.

Based on the information from you or your representative, you must file the following form(s) by the date shown next to it.

Form 1065

#### 04/15/2006

If you have questions about the form(s) or the due date(s) shown, you can call us at 1-800-829-4933 or write to us at the address at the top of the first page of this letter. If you need help in determining what your tex year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office or from our web site at www.irs.gov.

We assigned you a tax classification (S-Corporation, Partnership, etc.) based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a determination of your tax classification, you may seek a private letter ruling from the IRS under the procedure set forth in Payerus Procedure 98-01, 1998-1 I.R.B.7 (or superceding revenue procedure for th



OF

### COPANS DIXIE LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Florida Statutes Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

### **ARTICLE 1 - NAME**

The name of the limited liability company shall be **COPANS DIXIE LLC**, ("Company").

#### **ARTICLE 2 - ADDRESS**

The principal place of business of the Company in Florida shall be 450 East Copans Road, Pompano Beach, Florida 33064 and the mailing address shall be the same.

#### ARTICLE 3 - EFFECTIVE DATE

These Articles of Organization shall be effective immediately upon approval of the Secretary of State, State of Florida.

#### **ARTICLE 4 - DURATION**

Subject to the provisions of Article 9, the Company's existence shall terminate no later than 99 years from its date of commencement, unless the Company is earlier dissolved as provided in these Articles of Organization.

#### **ARTICLE 5 - PURPOSES AND POWERS**

The general purpose for which the Company is organized is to engage in the business of real estate investments and to transact any lawful business for which a limited liability company may be organized under the laws of the State of Florida. The Company shall have all the powers granted to a limited liability company under the laws of the State of Florida.

ATTACHNENT

COPANS DIXIE LLC

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REGISTERED OFFICE AND REGISTERED AGENT

The initial address of registered office of this Company is Spiegel & Utrera, P.A., at 1840 Southwest 22 Street, 4th Floor, Miami, Florida 33145. The name and address of the registered agent of this Company is Spiegel & Utrera, P.A., 1840 Southwest 22 Street, 4th Floor, Miami, Florida 33145.

#### ARTICLE 7 - ADMISSION OF NEW MEMBERS

——No additional member(s)-shall be admitted to the Company except with the unanimous written consent of all the member(s) of the Company and upon such terms and conditions as shall be determined by all the member(s). A member may transfer his or her interest in the Company as set forth in the regulations of the Company, but the transferee shall have no right to participate in the management of the business and affairs of the Company or become a member unless all the other member(s) of the Company other than the member proposing to dispose of his or her interest approve of the proposed transfer by unanimous written consent.

#### **ARTICLE 8 - TERMINATION OF EXISTENCE**

The Company shall be dissolved upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or manager, or upon the occurrence of any other event that terminates the continued membership of a member in the Company, unless the business of the Company is continued by the consent of all the remaining members, provided there are at least one remaining member.



COPANS DIXIE LLC

The Company shall be managed by a manager or manager(s) in accordance with regulations adopted by the member(s) for the management of the business and affairs of the Company. These regulations may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The names of all such manager(s) who is/are to serve as manager(s) is/are:

Operating Manager:

Hart McIntyre

Vice-Operating Manager: Aubrey Strul

Secretary:

Emile Sabga

Treasurer:

Emile Sabga

whose addresses shall be the same as the principal office of the Company.

ATTACHMENT # COX OU COPANS DIXIE LLC
Page 4

IN WITNESS WHEREOF, The undersigned, an authorized representative of the members, has made and subscribed these Articles of Organization at Coral Gables, Florida, for the foregoing uses and purposes, this January 5, 2005.

Elsie Sanchez, Authorized Representative of the Members

## ACCEPTANCE OF REGISTERED AGENT DESIGNATED IN ARTICLES OF ORGANIZATION

Spiegel & Utrera, P.A., having a business office identical with the registered office of the Company name above, and having been designated as the Registered Agent in the above and foregoing Articles of Organization, is familiar with and accepts the obligations of the position of Registered Agent under Section 608.4155, Florida Statutes and other applicable Florida Statutes.

Spiegel & Utrera, P.A.

By: //// Natalia Utrera, Vice President



				ATTACHMENT #			0-	50000017/6
Form 1065			U.S. Return of Partnership income				_	OMB No. 1545-0099
Department of the Treasury Internal Revenue Service			For calendar year 2007, or tax year beginning , 2007, ending , 20 .  See separate instructions.					2007
A Principal bush activity Real Estate &			Use the	Name of partnership COPANS DIXIE, LLC			₽	Employer ID number 52-2449498
B Principal product/service		label. Other-	Number, street, and room or suite no. If a P.O. 450 EAST COPANS ROAD	box, see the instru	ctions.	E	Date business started 01-01-2005	
Lessors of Non C Business code number			wise, print	City or town, state, and ZIP code		i	╁	Total assets (see instructions)
531120		·	Pompano Beach, FL 33064	·		\$	2,072,472	
G Check applicable boxes: (1) Initial return (2) Final return (3) X Name change (4) Address change (5) Amended H Check accounting method: (1) X Cash (2) Accrual (3) Other (specify)   Number of Schedules K-1. Attach one for each person who was a partner at any time during the tax year   J Check if Schedule M-3 attached								5
				ss income and expenses on lines 1a through 22				
Саппон.	1a			les				
Income			•		<del></del>	<del></del>	1c	· 0
	b							<del></del>
	2	Cost of goods sold (Schedule A, line 8)					3	0
	3	Gross profit. Subtract line 2 from line 1c						<del> </del>
	4	Ordinary income (loss) from other partnerships, estates, and trusts (attach statement)					4	<del>                                       </del>
	5	Net farm profit (loss) (attach Schedule F (Form 1040))					5	
	6	Net gain (loss) from Form 4797, Part II, line 17 (attach Form 4797)					6	
	7	Other income (loss) (attach statement)					7	<del></del>
	8	Total Income (loss). Combine lines 3 through 7					8_	0
	9	Salaries and wages (other than to partners) (less employment credits)						
Oeduc- tions (see the instruc- tions for limita- tions)	10	Guaranteed payments to partners						
	11	Repairs and maintenance						
	12	Bad debts						
	13	Rent						
	14	Taxes and licenses						
	15	Interest						<del></del>
						37,965	15	<del> </del>
	16a			red, attach Form 4562)	104	38 265		· ·
	b			ported on Schedule A and elsewhere on return			16c 17	<u> </u>
	17	Depletion (Do not deduct oil and gas depletion.)						
	18	Retirement plans, etc						
	19	Employee benefit programs					19 20	<del></del>
	20	Other deductions (attach statement)						
	21	Total deductions. Add the amounts shown in the far right column for lines 9 through 20						0
	22			ncome (loss). Subtract line 21 from line 8		.1	22	0
Sign Here	b	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than ge company manager) is based on all information of which preparer has any knowledge.  Signature of general partner or limited liability company member manager  Date					eral إ	statements, and to the partner or limited liability May the IRS discuss this return with the preparer shown below see inst.}?  X Yes No
Paid		Preparer's Date Check if self- ignature 0.2-1.8-2008 employed					- I	Preparer's SSN or PTIN
Prepare	r's 🕞	HERBERT E HUNTER DC CDA JEIN DA					-32	04553
Use Onl	1 , ,	f self-employed), Phone no.						
		address, & ZIP code Franklin MA 02038 508-528					-0	260
For Privac	v Act	et and Paperwork Reduction Act Notice, see separate instructions.					<u> </u>	Form 1065 (2007)
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JVA 07 106512 TWF 21637 Copyright Forms (Software Only) - 2007 TW