## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000005073

Entity Name: ANDERSON GREENSPON, LLC

FILED Jan 14, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

6070 N. FEDERAL HWY 550 SE 5TH AVENUE ATTN: PEG ANDERSON GREENSPON **APT 303 S** 

BOCA RATON, FL 33487 BOCA RATON, FL 334832

**Current Mailing Address: New Mailing Address:** 

6070 N. FEDERAL HWY 550 SE 5TH AVENUE APT 303 S

ATTN: PEG ANDERSON GREENSPON BOCA RATON, FL 33487 BOCA RATON, FL 334832

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

STEVEN I GREENWALD PA 6971 N. FEDERAL HWY SUITE 105 BOCA RATON, FL 33487 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: ADDITIONS/CHANGES:

MGRM Title: (X) Change ( ) Addition () Delete GREENSPON, MARAGRET ANDERSO GREENSPON, MARGARET ANDERSO Name: Name:

Address: 550 SE 5TH AVE #303 Address: 550 SE 5TH AVE #303 City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432

Title: MGRM () Delete Title: () Change () Addition

GREENSPON, LEE Name: Name: Address: 550 SE 5TH AVE #303 Address: City-St-Zip: BOCA RATON, FL 33432 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: MARGARET ANDERSON GREENSPON 01/14/2008