

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000005249

FILED
Sep 05, 2007
Secretary of State

Entity Name: WALDMAN FAMILY INVESTMENTS, LLC

Current Principal Place of Business:

38 NORTHWOODS LANE
BOYNTON BEACH, FL 33436 US

New Principal Place of Business:

Current Mailing Address:

38 NORTHWOODS LANE
BOYNTON BEACH, FL 33436 US

New Mailing Address:

FEI Number: 22-2295254 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:

WALDMAN, JACK J
38 NORTHWOODS LANE
BOYNTON BEACH, FL 33436 US

Name and Address of New Registered Agent:

WALDMAN, ANITA H
38 NORTHWOODS LANE
BOYNTON BEACH, FL 33436 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: ANITA H. WALDMAN

09/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WALDMAN, JACK J
Address: 38 NORTHWOODS LANE
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: MGRM (X) Delete
Name: WALDMAN, ANITA
Address: 38 NORTHWOODS LANE
City-St-Zip: BOYNTON BEACH, FL 33436 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WALDMAN, ANITA H
Address: 38 NORTHWOODS LANE
City-St-Zip: BOYNTON BEACH, FL 33436 US

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: ANITA H. WALDMAN

MGRM

09/05/2007

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