## 2007 LIMITED LIABILITY COMPANY

## FILED **ANNUAL REPORT** Jan 12, 2007 08:00 AM Secretary of State DOCUMENT # L05000008535 1. Entity Name MILTON WILTON ASSOCIATES, LLC Principal Place of Business Mailing Address 1933 COLD CANYON ROAD 1933 COLD CANYON ROAD CALABASSAS, CA 91302 CALABASSAS, CA 91302 CR2E083 (11/05) 01072007 No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2274099 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NRAI SERVICES, INC. DO NOT WRITE 2731 EXECUTIVÉ PARK DRIVE SUITE 4 IN THIS SPACE WESTON, FL 33331 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, typed or printed name of registered agent and title it applicable (NOTE. Registered Agent signature required when roinstaling) DATE U00000584100 01/12/07-80022-024 50.00 Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. TITLE NAME SAFENOWITZ, HOWARD STREET ADDRESS 1933 COLD CANYON ROAD CALABASAS, CA 91302 CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZP IN THIS SPACE TIRE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 eath; 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: GHING MANAGING MUMBER, OR AUTHORIZED REPRESENTATIVE SIGNATURE AND TYPED OR PRINTED HAS

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP