

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000015048

Entity Name: EBA-ASSOCIATES, L.L.C.

FILED  
Apr 30, 2008  
Secretary of State

## Current Principal Place of Business:

6231 PGA BLVD  
104  
PALM BEACH GARDENS, FL 33418

## New Principal Place of Business:

## Current Mailing Address:

6231 PGA BLVD  
104  
PALM BEACH GARDENS, FL 33418

## New Mailing Address:

FEI Number: 20-4637204      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

DAWSON, JO-ANN  
6231 PGA BLVD  
104  
PALM BEACH GARDENS, FL 33418 US

## Name and Address of New Registered Agent:

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:

Title: MGR ( ) Delete  
Name: DAWSON, JO-ANN  
Address: 10346 LITTLE MUSTANG WAY  
City-St-Zip: LAKE WORTH, FL 33467

Title: MGR ( ) Delete  
Name: MCCABE, EDWARD  
Address: 1224 BAYVIEW WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: MGR ( ) Delete  
Name: MCCABE, DONNA  
Address: 1224 BAYVIEW WAY  
City-St-Zip: WELLINGTON, FL 33414

Title: MGR ( ) Delete  
Name: DAWSON, BRIAN M  
Address: 10346 LITTLE MUSTANG WAY  
City-St-Zip: LAKE WORTH, FL 33467

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JO-ANN DAWSON

MGR

04/30/2008

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