

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000028065

FILED
May 02, 2007
Secretary of State

Entity Name: 101E OCEAN CITY LOFTS LLC

Current Principal Place of Business:

23415 RIO DEL MAR DRIVE
BOCA RATON, FL 33486 US

New Principal Place of Business:

Current Mailing Address:

23415 RIO DEL MAR DRIVE
BOCA RATON, FL 33486 US

New Mailing Address:

FEI Number: 20-2864443 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:

SAFFER, PATRICIA H
23415 RIO DEL MAR DRIVE
BOCA RATON, FL 33486 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: SAFFER, PATRICIA H
Address: 23415 RIO DEL MAR DRIVE
City-St-Zip: BOCA RAON, FL 33486

Title: MGR () Delete
Name: SAFFER, NEIL D
Address: 23415 RIO DEL MAR DRIVE
City-St-Zip: BOCA RATON, FL 33486

Title: MGR () Delete
Name: VIRGA COZ, VALERIE
Address: 2 OSPREY COURT
City-St-Zip: OCEAN RIDGE, FL 33435

Title: MGR () Delete
Name: COZ, STEPHEN W
Address: 2 OSPREY COURT
City-St-Zip: OCEAN RIDGE, FL 33435

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: PATRICIA SAFFER

MGRM

05/02/2007

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