

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L05000029327**

1. Entity Name  
3512 S. DIXIE, LLC



Principal Place of Business  
3030 S. DIXIE HIGHWAY, SUITE 5  
WEST PALM BEACH, FL 33405-1539

Mailing Address  
3030 S. DIXIE HIGHWAY, SUITE 5  
WEST PALM BEACH, FL 33405-1539



01042007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
25-1916271

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

SNED, WILLIAM H JR  
3030 S. DIXIE HIGHWAY, SUITE 5  
WEST PALM BEACH, FL 33405-1539

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

U000000589746  
01/18/07-80027-025 50.00

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	SNED, WILLIAM H JR
STREET ADDRESS	3030 S. DIXIE HIGHWAY, SUITE 5
CITY-ST-ZIP	WEST PALM BEACH, FL 334051539
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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 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:** *William H. Sned, Jr.*

William H. Sned, Jr. 1/11/07 561.655.8631

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #