

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 19, 2007 8:00 am
Secretary of State

04-19-2007 90031 006 ****50.00

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| DOCUMENT # L05000035403 1. Entity Name DOLPHIN PROPERTIES & INVESTMENTS #4 LLC |  |
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|---|---|
| Principal Place of Business 1700 NW 66 AVE 102 PLANTATION, FL 33313 | Mailing Address 1700 NW 66 AVE 102 PLANTATION, FL 33313 |
|---|---|

DO NOT WRITE IN THIS SPACE

03292007No Chg-LLC

CR2E083 (11/05)

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|---|--|
| 4. FEI Number 52-2457741 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$5.00 Additional Fee Required |

| | |
|--|---------------------------------------|
| 6. Name and Address of Current Registered Agent FORMAN, MILES A 888 SE 3RD AVE. SUITE 501 FT. LAUDERDALE, FL 33316 | 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**

| 9. MANAGING MEMBERS/MANAGERS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR FORMAN, MILES A 888 SE 3RD AVE SUITE 501 FT. LAUDERDALE, FL 33316 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR MURPHY, WILLIAM M 1700 NW 66 AVE., #102 PLANTATION, FL 33313 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
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**DO NOT WRITE
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: W. H. Murphy **William H. Murphy** 4/2/07 954-246-2224
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #