2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2008
Secretary of State

DOCUMENT# L05000036409

Entity Name: PA MANAGEMENT SERVICES LLC

Current Principal Place of Business:

1900 NW CORPORATE BOULEVARD
SUITE 225 WEST
BOCA RATON, FL 33431 US

New Principal Place of Business:

2385 NW EXECUTIVE CENTER DRIVE
SUITE 190
BOCA RATON, FL 33431 US

Current Mailing Address:

1900 NW CORPORATE BOULEVARD
SUITE 225 WEST
BOCA RATON, FL 33431 US

New Mailing Address:

2385 NW EXECUTIVE CENTER DRIVE
SUITE 190
BOCA RATON, FL 33431 US

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DEREK A. SCHWARTZ, P.A.
1900 NW CORPORATE BOULEVARD
SUITE 225 WEST
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

DEREK A. SCHWARTZ, P.A.
2385 NW EXECUTIVE CENTER DRIVE
SUITE 190
BOCA RATON, FL 33431 US

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: DEREK A. SCHWARTZ 04/30/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: SCHWARTZ, DEREK A
Address: 1900 NW CORPORATE BOULEVARD, STE. 225 WEST
City-St-Zip: BOCA RATON, FL 33431 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: SCHWARTZ, DEREK A
Address: 2385 NW EXECUTIVE CENTER DRIVE, SUITE 190
City-St-Zip: BOCA RATON, FL 33431 US

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: DEREK A. SCHWARTZ MGR 04/30/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date