

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000039544

Entity Name: WILTON CENTRE, LLC

FILED  
Mar 12, 2008  
Secretary of State

## Current Principal Place of Business:

2101 NORTH ANDREWS AVENUE  
SUITE 107  
WILTON MANORS, FL 33311 US

## Current Mailing Address:

2101 NORTH ANDREWS AVENUE  
SUITE 107  
WILTON MANORS, FL 33311 US

## New Principal Place of Business:

1400 E. OAKLAND PARK BLVD  
SUITE 111  
OAKLAND PARK, FL 33334 US

## New Mailing Address:

1400 E. OAKLAND PARK BLVD  
SUITE 111  
OAKLAND PARK, FL 33334 US

FEI Number: 20-2877575

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BEESON, JAMES M JR  
2101 NORTH ANDREWS AVENUE  
SUITE 107  
WILTON MANORS, FL 33311 US

## Name and Address of New Registered Agent:

KOPLOWITZ, DAVID  
1400 E. OAKLAND PARK BLVD  
SUITE 111  
OAKLAND PARK, FL 33334 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: DAVID KOPLOWITZ

03/12/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: NICO DEVELOPMENT, IN, C.  
Address: 2101 NORTH ANDREWS AVENUE SUITE 107  
City-St-Zip: WILTON MANORS, FL 33311

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: KOPLOWITZ, DAVID  
Address: 1400 E. OAKLAND PARK BLVD, STE 111  
City-St-Zip: OAKLAND PARK, FL 33334

Title: MGRM ( ) Change (X) Addition  
Name: LEWIN, ISRAEL  
Address: 1400 E. OAKLAND PARK BLVD, STE 111  
City-St-Zip: OAKLAND PARK, FL 33334

Title: MGRM ( ) Change (X) Addition  
Name: KOPLOWITZ, JOE  
Address: 1400 E. OAKLAND PARK BLVD, STE 111  
City-St-Zip: OAKLAND PARK, FL 33334

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: DAVID KOPLOWITZ

MGR

03/12/2008

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