

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000040662

FILED  
Feb 16, 2007  
Secretary of State

**Entity Name:** UNIVERSITY CORPORATE CENTER LLC

**Current Principal Place of Business:**

P.O. BOX 970489  
COCONUT CREEK, FL 33097

**New Principal Place of Business:**

2417 N UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

P.O. BOX 970489  
COCONUT CREEK, FL 33097

**New Mailing Address:**

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

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD, #221E  
PALM BEACH GARDENS, FL 33410 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: MGRM ( ) Delete  
Name: RUDDEN, THOMAS  
Address: P.O. BOX 970489  
City-St-Zip: COCONUT CREEK, FL 33097

Title: MGRM ( ) Delete  
Name: RUDDEN, GUILIT  
Address: P.O. BOX 970489  
City-St-Zip: COCONUT CREEK, FL 33097

**ADDITIONS/CHANGES:**

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 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: G RUDDEN

MM

02/16/2007

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