

2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED

07 OCT 10 PM 12:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L05000052455

1. Entity Name
ACS I GP LLC



Principal Place of Business
~~2977 MCFARLANE ROAD, STE. 303~~
~~COCONUT GROVE, FL 33133~~

Mailing Address
~~2977 MCFARLANE ROAD, STE. 303~~
~~COCONUT GROVE, FL 33133~~

2. Principal Place of Business - No P.O. Box #
6245 N. Federal Hwy.

3. Mailing Address
6245 N. Federal Hwy.

Suite, Apt. #, etc.
5th Floor

Suite, Apt. #, etc.
5th Floor

City & State
Ft. Lauderdale, FL

City & State
Ft. Lauderdale, FL

Zip
33308

Country
US

Zip
33308

Country
US

09242007 Chg-LLC CR2E083 (12/06)

4. FEI Number
20-2905000

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~GAMBO, ROBERT~~
~~2977 MCFARLANE ROAD, STE. 303~~
~~COCONUT GROVE, FL 33133~~

Name
Edward J. Pozzuoli, Esq.
Street Address (P.O. Box Number is Not Acceptable)
Tripp Scott, P.A.

110 SE 6th Street, 15th Floor

City
Ft. Lauderdale FL Zip Code
33301

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)

9/28/2007

DATE

Amended AR is \$50.00

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
GAMBO, ROBERT
2977 MCFARLANE ROAD, STE. 303
COCONUT GROVE, FL 33133 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
800110528778
10/09/07--01030--001 **\$0.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
HAGE, JONATHAN
6245 N. FEDERAL HIGHWAY, 5TH FLOOR
FT. LAUDERDALE, FL 33308 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
MGRM ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
RR CHARTER TRUST
6245 N. Federal Hwy., 5th Floor
Ft. Lauderdale, FL 33308 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

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

Jonathan K. Hage, MGRM 9/28/2007 954-202-3500

Date

Daytime Phone #