

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000070073

1. Entity Name

PREMIER DEVELOPERS IV ASSOCIATES, LLC.



Principal Place of Business

3201 W. GRIFFIN ROAD
SUITE#106
DANIA BEACH, FL 33312 US

Mailing Address

3201 W. GRIFFIN ROAD
SUITE#106
DANIA BEACH, FL 33312 US



04242008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-3283564

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

DECKELBAUM, GORDON
3201 W. GRIFFIN ROAD
SUITE#106
DANIA BEACH, FL 33312

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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

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME DECKELBAUM, GORDON
STREET ADDRESS 3201 W. GRIFFIN ROAD, STE#106
CITY-ST-ZIP DANIA BEACH, FL 333

TITLE MGR
NAME DECKELBAUM, BRADLEY
STREET ADDRESS 3201 W. GRIFFIN ROAD, STE#106
CITY-ST-ZIP DANIA BEACH, FL 33312

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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U000000942776
05/29/08-80035-002 138.75

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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:

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

Date

Daytime Phone #