

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000082091

FILED
Sep 06, 2007
Secretary of State

Entity Name: LEWIS, STROUD & DEUTSCH, P.L.

Current Principal Place of Business:

1900 GLADES ROAD
SUITE 251
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

1900 GLADES ROAD
SUITE 251
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 20-3385521 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WEINBERG, STEVEN A
7805 S.W. 6TH COURT
PLANTATION, FL 33324 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: PTNR () Delete
Name: LEWIS, HARRIET
Address: 860 SW 22ND STREET
City-St-Zip: BOCA RATON, FL 33486

Title: PTNR () Delete
Name: STROUD, NANCY
Address: 5871 BARTRAM ST.
City-St-Zip: BOCA RATON, FL 33433

Title: PTNR () Delete
Name: DEUTSCH, STEPHANIE
Address: 4125 GEORGES WAY
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: HARRIET LEWIS

PTNR

09/06/2007

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